Introduced by Senator Ortiz

February 25, 2000

An act to amend Section 1770 of Sections 1770, 1771, 1771.2, 1772, 1773, 1774, 1775, 1776.6, 1777, 1777.2, 1777.4, 1779, 1779.2, 1779.4, 1779.6, 1779.8, 1779.10, 1780, 1780.2, 1780.4, 1781, 1781.2, 1781.4, 1781.6, 1781.8, 1781.10, 1782, 1783, 1783.2, 1784, 1785, 1786, 1786.2, 1787, 1788, 1788.2, 1788.4, 1789, 1789.2, 1789.4, 1789.6, 1789.8, 1793.5, 1793.6, 1793.7, 1793.8, 1793.9, 1793.11, 1793.13, 1793.15, 1793.17, 1793.19, 1793.21, 1793.23, 1793.25, 1793.27, 1793.29, 1793.50, 1793.56, 1793.58, 1793.60, and 1793.62 of, to amend and renumber Sections 1771.9 and 1771.11 of, to add Sections 1771.3, 1772.2, 1779.7, and 1783.3 to, to repeal Section 1771.8 of, and to repeal and add Sections 1771.4, 1771.5, 1771.6, and 1771.7 of, the Health and Safety Code, relating to continuing care contracts, and making an appropriation therefor.

LEGISLATIVE COUNSEL'S DIGEST

SB 2077, as amended, Ortiz. Continuing care contracts: retirement communities: elderly.

Existing law contains provisions relating to supervision of life care contracts, also known as continuing care contracts, including requirements governing continuing care communities and contracts.

This bill would revise and recast these provisions, including changes to the definitions used in these provisions, rights of continuing care community residents, requirements for the SB 2077 — 2 —

obtaining of a certificate of authority for a continuing care community, and continuing care contract requirements.

Existing law creates the Continuing Care Provider Fee Fund, which is continuously appropriated to the State Department of Social Services for purposes of administering continuing care retirement community provisions. The fund consists of fees paid to the department pursuant to these provisions.

This bill would make various changes in provisions relating the establishment of fees, including reauirements pertaining to the establishment of fees for changes in care provider organizations, continuing thus increasing payments to thefund and thereby constituting appropriation.

Existing continuing care provisions specify that any entity that sells deposit subscriptions that either proposes to promise to provide care without having a current and valid permit to sell these subscriptions or fails to place any consideration into an escrow account is guilty of a misdemeanor.

This bill would provide that these misdemeanors relate to any entity that accepts deposits, rather than any entity that sells deposit subscriptions.

Because the bill would change the definition of a crime, it would constitute a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Existing law expresses the Legislature's findings, declarations, and intent regarding continuing care retirement communities.

This bill would include within the Legislature's findings, declarations, and intent the need to define the types of continuing care contracts, reserve requirements, and the types of disclosure to be provided to retirement community residents.

Vote: majority. Appropriation: no yes. Fiscal committee: no yes. State-mandated local program: no yes.

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The people of the State of California do enact as follows:

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SECTION 1. Section 1770 of the Health and Safety Code is amended to read:

- 1770. The Legislature finds, declares, and intends all of the following:
- (a) Continuing care retirement communities are an alternative for the long-term residential, social, and health care needs of California's elderly residents, seek to provide a continuum of care, minimize transfer trauma, and allow for provision of services in an appropriately licensed setting.
- (b) Because elderly residents often expend a significant portion of their savings in order to purchase care in the retirement community and, thereby, expect to receive care at the retirement community for the rest of their lives, tragic consequences can result from a continuing care provider becoming insolvent or unable to provide responsible care.
- (c) There is a need for disclosure concerning the terms of agreements made between prospective residents and the continuing care provider, and concerning the operations of the continuing care retirement community.
- (d) Providers of continuing care should obtain a certificate of authority to enter into continuing care contracts and be monitored and regulated by the State Department of Social Services.
- (e) This chapter applies equally to for-profit and nonprofit provider entities.
- (f) This chapter shall be the minimum requirement to be imposed upon any entity offering or providing continuing care, as set forth in this chapter.
- (g) Because the authority to enter into continuing care contracts granted by the State Department of Social Services is neither a guarantee of performance by the 34 providers nor an endorsement of contract provisions, prospective residents must carefully consider the risks, 36 benefits, and costs before signing a continuing care
- 37 contract and should be encouraged to seek financial and
- legal advice before doing so.

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(h) There is a need to define all of the following provisions:

- (1) The types of continuing care contracts.
- (2) Financial reserve requirements needed to fulfill continuing care contracts.
- (3) The types of disclosures to be provided to residents concerning community operations.
- SECTION 1. Section 1770 of the Health and Safety Code is amended to read:
- 1770. The Legislature finds, declares, and intends all of the following:
- (a) Continuing care retirement communities are 13 alternative for the long-term residential, social, and 14 health care needs of California's elderly residents, seek to provide a continuum of care, minimize transfer trauma, 16 and allow-for provision of services to be provided in an appropriately licensed setting.
- (b) Because elderly residents often both expend a 19 significant portion of their savings in order to purchase 20 care in the a continuing care retirement community and, 21 thereby, expect to receive care at the their continuing 22 care retirement community for the rest of their lives, tragic consequences can result-from if a continuing care 24 provider becoming becomes insolvent or unable to 25 provide responsible care.
- (c) There is a need for disclosure concerning the terms 27 of agreements made between prospective residents and continuing care provider, and concerning operations of the continuing care retirement community.
 - (d) Providers of continuing care should be required to obtain a certificate of authority to enter into continuing care contracts and should be monitored and regulated by the State Department of Social Services.
- (e) This chapter applies equally to for-profit and 35 nonprofit provider entities.
- chapter shall be states 36 (f) This the minimum 37 requirement requirements to be imposed upon 38 entity offering or providing continuing care, as set forth in this chapter.

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- (g) Because the authority to enter into continuing care contracts granted by the State Department of Social Services is neither a guarantee of performance by the providers nor an endorsement of any continuing care contract provisions, prospective residents must carefully consider the risks, benefits, and costs before signing a continuing care contract and should be encouraged to seek financial and legal advice before doing so.
- SEC. 2. Section 1771 of the Health and Safety Code is 10 amended to read:
 - 1771. Unless the context otherwise requires, definitions in this section govern the interpretation of this chapter.
- (a) (1) "Affiliate" means any person, corporation, liability company, business 15 limited trust. 16 partnership, unincorporated association, or other legal entity that directly or indirectly controls, is controlled by, 18 or is under common control with, a provider or applicant.
 - (2) "Affinity group" means a grouping of individuals entities sharing a common interest, philosophy, connection (e.g., military officers, religion).

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(3) "Annual report" means audited financial 24 statements and reserve calculations (as required by 25 Sections 1792.2 and 1793), with accompanying certified 26 public accountant's opinions thereon, resident lists, 27 evidence of fidelity continuing care bond, and 28 certification that the contract in use for new residents has 29 been approved by the department, all to be submitted to 30 the department by each provider annually, as required 31 by the report required to be filed annually by each provider with the department, as described in Section 1790.

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(4) "Applicant" means any entity, or combination of 35 36 entities, that submits and has pending an application to the department for a permit to sell deposit subscriptions accept deposits and certificates a certificate of authority. 38

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(5) "Assisted living" means assistance with personal activities of daily living, including dressing, feeding, toileting, bathing, grooming, mobility, and associated 4 tasks, to help provide for and maintain physical and 5 psychosocial comfort.

- (6) "Assisted living unit" means the living area or unit 7 within a continuing care retirement community that is specifically designed to provide ongoing assisted living.
- (7) "Audited financial statement" means 10 statements prepared accordance generally in with principles and shall include 11 accepted accounting 12 including the opinion of an independent certified public 13 accountant; accountant, and notes to the financial 14 statements considered customary or necessary to provide 15 full disclosure or adequate understanding of the and 16 complete information regarding the provider's financial 17 statements, financial condition, and operation.
 - (b) [reserved]

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- (c) (1) "Cancellation" "Cancel" means to destroy the 20 force and effect of an agreement or continuing care 21 contract, by making or declaring it void or invalid.
- (2) "Cancellation period" means the 90-day period, 23 beginning when the transferor signs resident physically 24 moves into the continuing care—contract retirement 25 community, during which time the resident or transferor 26 may rescind cancel the continuing care contract, as 27 provided in Section 1788.2.
- (3) "Care" means nursing, medical, or other health 29 related services, protection or supervision, assistance 30 with the personal activities of daily living, or any 31 combination of those services.
- (4) "Cash equivalent" means certificates of deposit 33 and United States treasury securities with a maturity of 34 five years or less. Possession and control of any of these instruments shall be transferred to the escrow agent or 36 depository at the time the deposit is paid.
- (5) "Certificate" or "certificate of authority" means 38 the written authorization from certificate issued by the department-for, properly executed and bearing the State Seal, authorizing a specified provider to enter into one or

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more continuing care contracts at a single specified continuing care retirement community.

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- (6) "Condition" means a restriction or required action placed on a provisional or final certificate of authority, specific action, or other requirement imposed by the department for the initial or continuing validity of a permit to accept deposits, a provisional certificate of 8 authority, or certificate of authority. A condition may limit the circumstances under which the provider may 10 enter into any new deposit agreement or contract, or may be imposed as a condition precedent to the issuance 12 of a final permit to accept deposits, a provisional certificate of authority, or certificate of authority.
- (7) "Consideration" means some right, interest, profit, 15 or benefit - accruing to one party, or paid, transferred, 16 promised, or provided by one party to another as an inducement to contract. Consideration includes some 18 forbearance, detriment, loss, or responsibility, that is 19 given, suffered, or undertaken by the other a party as an 20 inducement to another party to contract.
- (8) "Continuing care contract" means 22 contract that includes a promise, expressed or implied, by 23 a provider to provide one or more elements of care to an 24 elderly resident for the duration of his or her life or for a 25 term in excess of one year continuing care promise made, 26 in exchange for the payment of an entrance fee, the payment of periodic charges, or both types of payments. 28 A continuing care contract may consist of one agreement 29 or a series of agreements and may have other writings 30 incorporated by reference. A life care contract, as defined in paragraph (1) of subdivision (l), is a type of 32 continuing care contract.
- 33 (9) "Continuing care—contract advisory committee" 34 means an advisory panel appointed pursuant to Section 35 1777.
- (10) "Continuing care promise" means a promise, 37 expressed or implied, by a provider to provide one or 38 more elements of care to an elderly resident for the duration of his or her life or for a term in excess of one 40 year. Any such promise or representation, whether part

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1 of a continuing care contract, other agreement, or series 2 of agreements, or contained in any advertisement, 3 brochure, or other material, either written or oral, is a 4 continuing care promise.

(11) "Continuing care retirement community" 6 (CCRC) means a facility located within the State of 7 California where services promised in a continuing care 8 contract are provided. A distinct phase of development approved by the department may be considered to be the 10 continuing care retirement community when a project is 11 being developed in successive—multiple distinct phases 12 over a period of time. When the services are provided in 13 a resident's residents' own-home homes, the homes into 14 which the provider takes those services—collectively are 15 considered part of the continuing care retirement 16 community.

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- (12) "Control" means the power to direct directing or 19 cause causing the direction of the financial management 20 and or the policies of another entity, including an 21 operator of a continuing care retirement community, whether through the by means of the controlling entity's 23 ownership of voting securities, by interest, contract, or 24 otherwise any other involvement. A parent entity or sole 25 corporate member of a corporation may exhibit control 26 of the operator of the member of an entity controls a 27 subsidiary entity provider for a continuing 28 retirement community through direct participation if its 29 officers, directors, or agents directly participate in the 30 management of the subsidiary entity or in the initiation 31 or approval of policies—directly affecting that affect the 32 continuing care retirement community's operations. including, but not limited to, approval of approving 34 budgets or approval of the administrator for a continuing 35 care retirement community administrator.
- (d) (1) "Department" means State Department 36 the 37 of Social Services.
 - (2) "Deposit subscription" "Deposit" means a cash or eash equivalent payment any transfer of consideration, including a promise to transfer money or property, made

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1 by a subscriber to an applicant and the escrow agent prior 2 to the release of escrow during development or 3 construction of a continuing care retirement community a depositor to any entity that promises or proposes to 5 promise to provide continuing care, but is not authorized to enter into a continuing care contract with the potential depositor.

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- (3) "Deposit—subscription agreement" 9 written contract in compliance with Section 1780.4 10 entered into between the transferor and applicant. This agreement allows an applicant to accept deposit 12 subscriptions prior to the issuance of a provisional 13 certificate of authority any agreement made between 14 any entity accepting a deposit and a depositor. Deposit agreements for deposits received by an applicant prior to 16 the department's release of funds from the deposit escrow account shall be subject to the requirements described in Section 1780.4.
- (4) "Depository" means a bank or institution that is a 20 member of the Federal Deposit Insurance Corporation or a comparable title deposit insurance program. The department's approval of the depository shall be based, in part, upon its capability to ensure the safety of funds and 24 properties entrusted to it and capable and willing to 25 perform the obligations of the depository pursuant to the 26 escrow agreement and this chapter. The depository may 27 be the same entity as the escrow agent.
- (5) "Depositor" means any prospective resident who 29 pays a deposit. Where any portion of the consideration 30 transferred to an applicant as a deposit or to a provider 31 as consideration for a continuing care contract is 32 transferred by a person other than the prospective 33 resident or a resident, that third-party transferor shall 34 have the same cancellation or refund rights as the 35 prospective resident or resident for whose benefit the 36 consideration was transferred.
- (6) "Director" means the Director of the State 38 Department of Social Services.
- (e) (1) "Elderly" means an individual who is 60 years 39 of age or older. 40

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(2) "Entity" means an organization or being that possesses separate existence for tax purposes individual, partnership, corporation, limited liability company, and any other form for doing business. Entity includes a 5 person, sole proprietorship, estate, trust, association, and joint venture, partnership, or corporation.

- (3) "Entrance fee" means—an the sum of any initial, amortized, or deferred transfer of consideration made or promised to be made by, or on behalf of, a person 10 entering into a continuing care contract, for the purpose 11 of assuring care or related services pursuant to that 12 continuing care contract or as full or partial payment for 13 the promise to provide one or more elements of care for 14 the term of the continuing care contract. An entrance 15 Entrance fee includes the purchase price 16 condominium, cooperative, or other interest sold in 17 connection with a promise of continuing care. —The 18 entrance fee may include a previously paid deposit 19 subscription, which is credited to the total entrance fee 20 due at the time the transferor signs the continuing care 21 contract. An entrance fee initial, amortized, or deferred 22 transfer of consideration that is greater in value than 12 23 times the monthly care fee shall be presumed to imply a 24 promise to provide care for more than one year. The term 25 "accommodation fee" may be synonymously used to 26 mean an entrance fee be an entrance fee.
- (4) "Equity" means the residual value of a business or 28 real property beyond any mortgage or deed of trust thereon and liability therein in excess of the aggregate amount of all liabilities secured by the property.
- (5) "Equity interest" means an interest held by a 32 resident in a continuing care retirement community that consists of either an ownership interest in any part of the 34 continuing care retirement community property or a 35 transferable membership that entitles the holder to 36 reside at the continuing care retirement community.
- (6) "Equity project" means continuing a 38 development project in which the transferors are given retirement community where residents receive an equity interest in the continuing care retirement community

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property or in a transferable membership in a resident's 2 association.

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- (7) "Escrow agent" means a bank or institution, 5 including, but not limited to, a title insurance company, approved by the department—as capable of ensuring the safety of the funds and properties entrusted to it and capable and willing to perform the terms of the escrow pursuant to the escrow agreement and this chapter to 10 hold and render accountings for deposits of cash or cash equivalents.
- (f) "Facility" means any place or accommodation—in 13 which where a provider undertakes to provide provides 14 or will provide a resident with care or related services, whether or the place accommodation not or 16 constructed, leased, otherwise owned, rented, or contracted for by the provider.
 - (g) (reserved)
 - (h) (reserved)
- (i) "Inactive certificate of authority" means 21 certificate that has been declared inactive terminated under Section 1793.8 and renders its holder no longer authorized to enter into continuing care contracts, but still contractually obligated to continuing care residents and statutory compliance requirements.
 - (i) (reserved)
 - (k) (reserved)
- (1) (1) "Life care contract" means a continuing care 29 contract that includes a promise, expressed or implied, by 30 a provider to provide or pay for routine services at all levels of care, including acute care and the services of 32 physicians and surgeons, to the extent not covered by 33 other public or private insurance benefits, to a resident 34 for the duration of his or her life. Care shall be provided 35 under a life care contract in a continuing care retirement 36 community having a comprehensive continuum of care, including a skilled nursing facility, under the ownership and supervision of the provider on or adjacent to the premises. In a life care contract, no No change is may be 40 made in the monthly fee based on level of service care.

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A life care contract shall also include provisions to subsidize residents who become financially unable to pay their monthly care fees.

- (2) "Life lease" means a landlord-tenant relationship 5 in which the tenant obtains only the right to possess a defined living unit for life. In a life lease there is no obligation or intent to provide care and services to the tenant at any time, present or future.
- (m) (1) "Monthly care fee" means the monthly 10 charge fee charged to a resident in a continuing care contract on a monthly or other periodic basis for current 12 accommodations and services rendered, including care, 13 board, or lodging, and any other periodic charges to the 14 resident, determined on a monthly or other recurring 15 basis, pursuant to the provisions of a continuing care 16 contract. Monthly care fees are exclusive of periodic including care, board, or lodging. Periodic entrance fee payments or other prepayments shall not be monthly 18 care fees.
- (2) "Monthly fee contract" means a continuing care 21 contract that provides by its terms for the monthly payment of a fee for accommodations and services 23 rendered requires residents to pay monthly care fees.
- (n) "Nonambulatory person" means a person who is 25 unable to leave a building unassisted under emergency conditions, as in the manner described by Section 13131.
 - (o) (reserved)
- (p) (1) "Per capita cost" means a continuing care 29 retirement community's operating expenses, excluding depreciation, divided by the average number residents.
- (2) "Periodic charges" means fees paid by a resident 32 33 on a periodic basis.
- (3) "Permit to sell deposit subscriptions" accept 34 35 deposits" means a written authorization 36 department—for permitting an applicant to enter into—one or more deposit subscription agreements at regarding a single specified—location continuing care retirement 38 community. 39

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(3) "Personal care" means assistance with personal activities of daily living, including dressing, feeding, toileting, bathing, grooming, mobility, and associated tasks, to help provide for and maintain physical and psychosocial comfort.

(4) "Personal care unit" means the living unit within a physical area of a continuing care retirement community specifically designed to provide ongoing personal care. A personal care unit is synonymous with an assisted living unit.

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- (4) "Prepaid contract" means continuing a care 13 contract in which the monthly care fee, if any, may not be adjusted to cover the actual cost of care and services.
- (5) "Preferred access" means that residents who have 16 previously occupied a residential living unit have a right over other persons to any assisted living or skilled nursing beds that are available at the community.
- (6) "Processing fee" means a payment by the 20 transferor to cover administrative costs of processing the application of a subscriber depositor or prospective resident.
- (7) "Promise to provide one or more elements of 24 care" means any expressed or implied representation 25 that one or more elements of care will be provided or will 26 be available, such as by preferred access, whether the representation is part of a continuing care contract, other agreement, or series of agreements, or is contained in any advertisement, brochure, or other material, either 30 written or oral.
- (8) "Proposes" means representation a 32 applicant or provider plans will or intends to make a future promise to provide care, which may be including 34 a promise that is subject to the happening of certain 35 events, a condition, such as the construction of a 36 continuing care retirement community—construction or obtaining the acquisition of a certificate of authority.
- (9) (A) "Provider" means an any entity that provides, 39 promises to provide, continuing care, makes a continuing 40 care promise, or proposes to promise to provide, care for

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life or for more than one year continuing care. "Provider" includes

- (B) "Provider" also means any entity that controls the an entity that promises care as determined by the department. A described in subparagraph (A). The department shall determine whether an entity controls another entity for purposes of this article.
- (C) "Provider" shall not include a homeowner's association, cooperative, or condoninium association shall 10 not may be a provider.
- (10) "Provisional certificate of authority" means 12 written authorization the certificate issued 13 department that allows the provider to enter into 14 continuing care contracts. This provisional certificate is 15 issued after the conditions defined in Section 1786 have 16 been met and is issued for a term specified by subdivision 17 (b) of, properly executed and bearing the State Seal, 18 under Section 1786. A provisional certificate of authority shall be limited to the specific continuing care retirement community and number of units identified in the applicant's application.
 - (q) (reserved)
- (r) (1) "Refundable "Refund reserve" means 24 amount calculated to ensure the availability of funds for specified refunds of entrance fees reserve a provider is required to maintain, pursuant to Section 1793.
- (2) "Refundable contract" means a continuing care 28 contract form that includes promises a promise, expressed or implied, by the provider to pay -refunds of an entrance fees fee refund or to repurchase the transferor's unit, membership, stock, or other interest in the continuing care retirement community when the specified refund right is not fully amortized by the end of 34 the sixth year of residency. A lump sum payment to a 35 resident after termination of a continuing care contract 36 that is conditioned upon resale of a unit shall not be 37 considered a refund and shall not be advertised as a 38 refund promise to refund some or all of the initial entrance fee extends beyond the resident's sixth year of residency. Providers that enter into refundable contracts

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1 shall be subject to the refund reserve requirements of Section 1793. A continuing care contract that includes a 3 promise to repay all or a portion of an entrance fee that 4 is conditioned upon reoccupancy or resale of the unit 5 previously occupied by the resident, shall not 6 considered a refundable contract for purposes of the refund reserve requirements of Section 1793, provided that this conditional promise of repayment is not referred to by the applicant or provider as a "refund."

- (3) "Resale fee" means a levy by the provider against the proceeds from the sale of a transferor's equity interest.
- (4) "Reservation fee" means cash received by an 14 applicant from an interested individual during a market 15 test feasibility study that complies with subdivision (b) of 16 Section 1771.6 refers to consideration collected by an entity that has made a continuing care promise or is 18 proposing to make this promise and has complied with Section 1771.4.

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(5) "Resident" means a person who enters into a continuing care contract with a provider, or who is designated in a continuing care contract to be a person being provided or to be provided services, including care, board, or lodging.

(6) "Residential care facility for the elderly" means a housing arrangement as defined by Section 1569.2.

- (7) "Residential living unit" means a living unit in a continuing care retirement community that is included in the residential care facility for the elderly license capacity, but not used exclusively for personal care 34 assisted living or nursing services.
- (s) "Subscriber" means a person who has applied to be 36 a resident in a continuing care retirement community 37 under development or construction, and who has entered into a deposit subscription agreement. (reserve)

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(t) (1) "Termination" means the ending continuing care contract as provided for in the terms of the continuing care contract.

- (2) "Transfer" means conveyance of a right, title, or 5 interest.
 - (3) "Transfer fee" means a levy by the provider against the proceeds from the sale of a transferor's equity
- (4) "Transfer trauma" means death, depression, or 10 regressive behavior, that is caused by the abrupt and involuntary transfer of an elderly resident from one home to another, resulting in and results from a loss of familiar physical environment, loss of well-known neighbors, 14 attendants, nurses and medical personnel, the stress of an abrupt break in the small routines of daily life, and or the 16 major loss of visits from friends and relatives who may be unable to reach the new facility.

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- (3) "Transferor" means a person who transfers, or 20 promises to transfer a sum of money or property for the purpose of assuring, consideration in exchange for care or and related services pursuant to under a continuing care contract, whether or proposed continuing care contract, for the benefit of the transferor or another.
- SEC. 3. Section 1771.2 of the Health and Safety Code 26 is amended to read:
- 1771.2. (a) No entity proposing to promise to provide 28 eare shall An entity shall be required to apply for and hold a currently valid permit to accept deposits before it may enter into a deposit subscription agreement or sell accept a deposit subscription unless the entity has applied for and received a current and valid permit to sell deposit subscriptions.
- (b) No continuing care contract shall be executed, 35 unless the provider has a current and A provider shall 36 hold a currently valid provisional certificate of authority or final certificate of authority before it may enter into a continuing care contract.
- (c) If Before a provider subcontracts or assigns to 39 another entity the responsibility to provide continuing

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1 care, that other entity shall have a current and valid certificate of authority. — The A provider holding a certificate of authority may contract for the provision of 4 a particular aspect of continuing care, such as medical 5 care, with another entity that does not possess 6 certificate of authority, that other entity if appropriately licensed under laws of this state to provide that care, and that care is the provider has not paid in advance for more than one year in advance for that care.

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- (d) If an entity enters into an agreement to provide 11 care for life or for more than one year to a person under 12 60 years of age in return for payment of an entrance fee 13 or periodic charges consideration, and the agreement 14 includes the provision of services to that person after age 15 60, when the person turns 60 years of age, the promising 16 entity shall either terminate the continuing care contract 17 or meet shall comply with all the requirements of 18 imposed by this chapter when the first such person turns 19 60 years of age.
- (e) Homeowner's associations, cooperatives, 21 condominium associations shall not be providers.
 - SEC. 4. Section 1771.3 is added to the Health and Safety Code, to read:
- 1771.3. (a) This chapter shall not apply to either of 25 the following:
 - (1) An arrangement for the care of a person by a relative.
- (2) An arrangement for the care of a person or persons 29 from only one family by a friend.
- (b) This chapter shall not apply to any admission or 31 residence agreements offered by32 communities for the elderly or residential care facilities 33 for the elderly that promise residents preferred access to 34 assisted living or nursing care, when all of the following 35 conditions exist:
- (1) Residents pay on a fee-for-service basis for 36 37 available assisted living and nursing care.
- (2) The fees paid for available assisted living and 38 39 nursing care are the same for residents who have 40 previously occupied a residential living unit as for

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residents who have not previously occupied a residential living unit.

- (3) No entrance fee or prepayment for future care or access, other than monthly care fees, is paid by, or 5 charged to, any resident at the community or facility. For 6 purposes of this paragraph, the term entrance fee shall not include initial, deferred, or amortized payments that cumulatively do not exceed seven thousand five hundred dollars (\$7,500).
- (4) The provider has not made a continuing care 10 11 promise, other than a promise as described in paragraph 12 (5).
 - (5) (A) The admission or residence agreement states:

"This agreement does not guarantee that an assisted 15 living or nursing bed will be available for residents, but, 16 instead, promises preferred access to any assisted living or nursing beds that are available at the community or 18 facility. The promise of preferred access gives residents who have previously occupied a residential living unit a right over other persons to such beds."

"A continuing care contract promises that care will be 22 provided to residents for life or for a term in excess of a 23 year. (Name of community or facility) is not a continuing 24 care retirement community and (name of provider) does 25 not hold a certificate of authority to enter into continuing 26 care contracts and is not required to have the same fiscal reserves as a continuing care provider. This agreement is 28 not a continuing care contract and is exempted from the continuing care statutes under subdivision (b) of Section 30 1771.3 of the Health and Safety Code so long as the conditions set forth in that section are met."

- (B) The admission or residence agreement shall also contain the policies and procedures regarding transfers to higher levels of care within the community or facility.
- 35 (c) (1) Any entity may apply to the department for a 36 Letter of Exemption pursuant to subdivision (b). The application for exemption shall state that the requesting entity satisfies the requirements for an exemption under 38 this section.

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(2) An application to the department for a Letter of Exemption shall be required to include all of the following:

- (A) A nonrefundable one thousand dollar (\$1,000) 4 5 application fee.
 - (B) The name and business address of the applicant.

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- (C) A description of the services and care available or provided to residents of the community or facility.
- (D) Documentation establishing that the requesting 10 entity satisfies the requirements for an exemption under *subdivision (b), including all of the following:*
- (i) A schedule showing all fees for assisted living and 13 skilled nursing care charged to residents at the facility or 14 community who have previously occupied a residential 15 living unit.
- (ii) A schedule showing all fees for assisted living and skilled nursing care charged to residents at the facility or 18 community who have not previously occupied 19 residential living unit.
- (iii) A description of the differences between the fees 21 for assisted living and skilled nursing care charged to 22 residents who have previously occupied a residential unit 23 and the fees for assisted living and skilled nursing care charged to residents who have not previously occupied a 25 residential unit.
 - (iv) A schedule showing any other fees charged to residents of the community or facility.
- (v) Copies of all admission and residence agreement 29 forms that have been entered into, or will be entered into, with residents at the community or facility.
- (vi) Any other information reasonably requested by 32 the department.
- (d) The department shall issue a Letter of Exemption 34 pursuant to subdivision (c) to a requesting entity if the department determines that either of the following 36 *conditions are met:*
- 37 (1) The requesting entity satisfies each ofthe requirements for an exemption under subdivision (b). 38
- 39 (2) *The* requesting entity satisfies each of the requirements for an exemption under 40 subdivision (b)

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requirements of paragraph (2) of 1 other than the subdivision (b), and there is no substantial difference 3 between the fees for available assisted living and skilled 4 nursing care paid by residents who have previously 5 occupied a residential living unit, and the fees for 6 available assisted living and skilled nursing care paid by residents who have previously occupied a residential 8 living unit.

- (e) If, at any time, a provider that has received a 10 Letter of Exemption pursuant to subdivision (c) no 11 longer meets any of the requirements for that exemption, 12 the requirements of this chapter shall apply, and the 13 department may impose appropriate remedies 14 penalties as set forth in Article 7 (commencing with 15 Section 1793.5).
- SEC. 5. Section 1771.4 of the Health and Safety Code 16 17 is repealed.
- 1771.4. Any entity which promises to provide care for 19 life or for more than one year in return for payment of an 20 entrance fee or periodic charges from, or on behalf of, a 21 person 60 years of age or older shall first obtain written 22 licenses for the entire continuing care retirement 23 community pursuant to Chapter 3.2 (commencing with 24 Section 1569), including residential living and personal 25 care units, and Chapter 2 (commencing with Section 26 1250) if a skilled nursing facility is on the premises.
- SEC. 6. Section 1771.4 is added to the Health and 27 Safety Code, to read: 28 29
- 1771.4. (a) An entity may conduct a market test for 30 a proposed continuing care retirement community and collect reservation fees from persons interested in 32 residing at the proposed continuing care retirement community without violating this chapter if all of the 34 following conditions are met:
- (1) The entity has filed with the department an 36 application for a permit to accept deposits and for a certificate of authority for the project. 37
- (2) The entity's application includes the proposed 38 39 reservation agreement form and a proposed escrow 40 agreement that provides all of the following:

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(A) All fees shall be deposited in escrow.

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- (B) Refunds shall be made within 10 calendar days after the proposed resident's request or 10 days after denial of the application for a permit to accept deposits.
- (C) All fees shall be converted to deposits within 15 days after a permit to accept deposits is issued.
- (3) The department has acknowledged in writing its receipt of the entity's application and its approval of the 9 entity's proposed reservation agreement between 10 payer and the entity and the escrow agreement between 11 the escrow holder and the entity.
- (4) The amount of any reservation fee collected by the 13 entity does not exceed one thousand dollars (\$1,000) or 1 14 percent of the average entrance fee amount as determined from the entity's application, whichever is 16 greater.
- (5) All reservation fees collected by the entity are 18 placed into an escrow under the terms of the approved reservation agreement and escrow agreement.
- (6) The reservation agreement and escrow agreement 21 provide that the payer shall be entitled to a refund within 10 calendar days after making a request for a refund and 23 within 10 calendar days after any denial of the entity's 24 application for a permit to accept deposits.
- (7) The reservation agreement and escrow agreement 26 provide that the payer's reservation fee converted into a deposit within 15 days after the entity's permit to accept deposits is issued.
- SEC. 7. Section 1771.5 of the Health and Safety Code 30 is repealed.
- 1771.5. (a) No resident of any continuing care 32 retirement community shall be deprived of any civil or legal right, benefits, or privileges guaranteed by law, by 34 the California Constitution, or by the United States 35 Constitution solely by reason of status as a resident of a 36 community. In addition, because of the discretely 37 different character of condominium and independent 38 living programs that are a part of a continuing care retirement community, this section shall augment

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73523 of the California Code of Regulations, and applicable federal law and regulations. All residents in independent living programs have all of the following 3 4 rights:

- (1) To live in an attractive, safe, and well maintained physical environment.
- (2) To live in an environment that enhances personal dignity, maintains independence, and encourages self-determination.
- (3) To participate in activities that meet individual physical, intellectual, social, and spiritual needs.
- (4) To expect effective channels of communication between residents and staff, and between residents and the administration or board of directors.
- (5) To receive a clear and complete written contract 16 that establishes the mutual rights and obligations of the resident and the continuing care retirement community.
 - (6) To maintain and establish ties to the local community.
 - (b) A continuing care retirement community shall maintain an environment that enhances the residents' self-determination and independence. The provider shall:
- (1) Permit the formation of a resident council by 25 interested residents, provide space and post notices for meetings, and provide assistance in attending meetings for those residents who request it. In order to permit a 28 free exchange of ideas, at least part of each meeting shall 29 be conducted without the presence of any continuing 30 care retirement community personnel. The council may, 31 among other things, make recommendations to management regarding resident issues which impact their quality of life. Proper notice shall be provided of all 34 council meetings and the meetings shall be open to all residents to attend as well as present issues when 36 prearranged with the council president. Executive sessions of the council shall be for attendance only by 38 council members.
- (2) Establish policies and procedures that promote the 40 sharing of information, dialogue between residents and

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1 management and access to the board of directors or general partners. The policies and procedures shall be 3 evaluated at a minimum of every two years by the 4 continuing care retirement community administration to determine their effectiveness in maintaining meaningful 5 resident/management relations.

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- (c) In addition to any statutory or regulatory bill of rights required to be provided to residents of residential care facilities or skilled nursing facilities, the provider shall provide a copy of the bill of rights provided for by this section to each resident at or before the resident's admission to the community.
- (d) The department may, upon receiving a complaint 14 relative to this section, request a copy of the policies and procedures along with documentation on the conduct and findings of any self-evaluations and consult with the Continuing Care Contract Committee for determination of compliance.
- (e) Failure to comply with this section shall be grounds 20 for suspension, condition, or revocation of the provisional or final certificate of authority pursuant to Section 1793.21.
- 23 SEC. 8. Section 1771.5 is added to the Health and 24 Safety Code, to read:
- 1771.5. The department shall not issue a provisional certificate of authority or a certificate of authority to an applicant until the applicant has obtained licenses for the 28 entire continuing care retirement community, including 29 a license to operate the residential living and assisted 30 living units, pursuant to Chapter 3.2 (commencing with Section 1569) and if a skilled nursing facility is on the premises, a license for the facility pursuant to Chapter 2 (commencing with Section 1250).
- 34 SEC. 9. Section 1771.6 of the Health and Safety Code 35 is repealed.
- 1771.6. (a) This chapter does not apply to any of the 36 37 following:
- (1) Any arrangement for the care of a person by a 38 relative.

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(2) Any arrangement for the care of a person or persons from only one family by a friend.

- (b) Any market test feasibility study during which reservation fees are being collected shall not be considered to be a violation of this chapter, provided that all of the following have occurred:
- (1) An application for a permit to sell deposit subscriptions and a certificate of authority for the project has been filed with, and the receipt has been acknowledged in writing by, the department.
- (2) The amount of each reservation fee does not exceed 1 percent of the average entrance fee.
 - (3) The reservation fee is placed in escrow.
- 14 (4) The escrow agreement provides for a refund 15 within 10 calendar days after the request of a potential 16 resident or within 10 calendar days after denial of the application for the permit to sell deposit subscriptions.
 - (5) The escrow agreement provides for the conversion of the reservation fee to a deposit subscription when a permit to sell deposit subscriptions is issued.
 - SEC. 10. Section 1771.6 is added to the Health and Safety Code, to read:
- 1771.6. (a) Any entity may apply to the department 24 for a Letter of Nonapplicability for reasons other than 25 those specified in Section 1771.3, which states that the provisions of this chapter do not apply to its community, project, or proposed project.
- 28 (b) Applications for Letters of Nonapplicability shall 29 be made to the department in writing and include the following: 30
 - (1) A nonrefundable one thousand dollar (\$1,000) application fee.
- 33 (2) A list of the reasons why the existing or proposed 34 project may not be subject to this chapter.
- (3) A copy of the existing or proposed contract 35 36 between the entity and residents.
 - (4) Copies of all advertising material.
- (5) Any other information reasonably requested by 38 39 the department.

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(c) The department shall within seven calendar days receipt of therequest for Letter after a Nonapplicability, acknowledge receipt of the request. The department shall within 30 calendar days after all 5 materials are received in support of the request, either issue the Letter of Nonapplicability, or notify the entity of the department's reasons for denial of the request.

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- (d) If the department determines that the entity does not qualify for a Letter of Nonapplicability, the entity 10 shall refrain from, or immediately cease, entering into continuing care contracts. If an entity to which this subdivision applies intends to provide continuing care, an application for a certificate of authority shall be required 14 to be filed with the department pursuant to this chapter. 15 If the entity to which this subdivision applies does not 16 intend to provide continuing care, it shall alter its plan of operation so that the project is not subject to this chapter. To obtain a Letter of Nonapplicability for the revised project, the entity shall submit a new application and fee.
- 20 SEC. 11. Section 1771.7 of the Health and Safety Code 21 is repealed.
 - 1771.7. (a) The department may issue a limited certificate of authority to any equity project constructed and occupied prior to January 1, 1987, and offering a care program in connection with the sale of residential units. The department may specify any limitations on this certificate of authority at the time of its issuance.
 - (b) To qualify for a limited certificate of authority, an equity project shall file an application with the department pursuant to Section 1779.2. The application also shall include all of the following:
 - (1) A Letter of Non-applicability, written to the project by the department prior to January 1, 1987, declaring the life care laws to be inapplicable to the project.
- detailed description of the program, 36 demonstrating that the program has not changed since 37 the date of the Letter of Non-applicability.

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(3) The project's continuing care contract that has been modified to disclose the limitations imposed on the limited certificate of authority.

- (c) An application under this section shall be exempt 5 from the requirement of the application fee specified in subdivision (d) of Section 1779.2.
- 7 SEC. 12. Section 1771.7 is added to the Health and Safety Code, to read: 8
- 9 1771.7. (a) No resident of any continuing 10 retirement community shall be deprived of any civil or legal right, benefits, or privileges guaranteed by law, by 12 the California Constitution, or by the United States 13 Constitution solely by reason of status as a resident of a 14 community. In addition, because of the discretely 15 different character of residential living unit programs a part of continuing care retirement are 17 communities, this section shall augment Chapter 3.9 18 (commencing with Section 1599), Section 73523 of Title 19 22 of the California Code of Regulations, and applicable 20 federal law and regulations.
 - (b) All residents in residential living units shall have all of the following rights:
- (1) To live in an attractive, safe, and well maintained 24 physical environment.
- (2) To live in an environment that enhances personal independence, and 26 dignity, maintains encourages self-determination.
- (3) To participate in activities that meet individual 29 physical, intellectual, social, and spiritual needs.
 - (4) To expect effective channels of communication between residents and staff, and between residents and the administration or provider's governing body.
- (5) To receive a clear and complete written contract 34 that establishes the mutual rights and obligations of the resident and the provider. 35
- (6) To maintain and establish ties to 36 the local 37 community.
- 38 (c) A provider shall maintain an environment that self-determination the residents' 40 independence. The provider shall permit the formation

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1 of a resident association by interested residents, who may elect a governing body. The provider shall permit the 3 association to have space and post notices for meetings. 4 The provider shall provide assistance in attending 5 meetings for those resident, who request it. In order to 6 permit a free exchange of ideas, at least part of each meeting shall be conducted without the presence of any 8 provider personnel. The association may, among other 9 things, make recommendations to management 10 regarding resident issues that impact their quality of life. Meetings shall be open to all residents, and all residents 12 may present issues. Executive sessions of the association's governing body shall be attended only by the governing 13 14 body. 15

- (d) A retirement provider continuing care 16 establish policies and procedures that promote sharing of information, dialogue between residents and 18 management, and access to the provider's governing 19 body. The policies and procedures shall be evaluated, at minimum, every two years by the provider to determine their effectiveness in maintaining meaningful resident/management relations.
- (e) Failure to comply with this section shall be grounds 24 for suspension, condition, or revocation of the provisional 25 certificate of authority or certificate of authority pursuant to Section 1793.21.

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- SEC. 13. Section 1771.8 of the Health and Safety Code is repealed.
- 1771.8. (a) Any entity which believes its project is not subject to this chapter or which is contemplating a project which it believes may not be subject to this chapter, may apply to the department for a Letter of Non-applicability.
- (b) Applications for Letters of Non-applicability shall be made to the department in writing and include the 34 following:
- (1) A nonrefundable one thousand dollar (\$1,000) 36 37 application fee.
- (2) A list of the reasons why the existing or proposed 38 project may be exempt.

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- (3) A copy of the existing or proposed contract between the entity and residents.
 - (4) Copies of all advertising material.
 - (5) Any other reasonable information requested by the department.
 - (c) The department shall follow these timelines in reviewing requests for Letters of Non-applicability:
 - (1) Within seven calendar days, the department shall acknowledge receipt of the request.
 - (2) Within 30 calendar days after all materials are received, the department shall either issue the Letter of Non-applicability, or notify the entity of the department's reasons for denial of the request.
- (d) If the department determines that the entity does 15 not qualify for a Letter of Non-applicability, the entity shall refrain from or immediately cease entering into continuing care contracts.
 - (1) If the entity intends to provide continuing care, an application for a certificate of authority shall be filed with the department pursuant to this chapter.
 - (2) If the entity does not intend to provide continuing care, it shall alter its plan of operation so that the project is not subject to this chapter and submit a new application and fee for a Letter of Non-applicability.
- SEC. 14. Section 1771.9 of the Health and Safety Code 25 is amended and renumbered to read: 26
- 27 1771.9.
- 28 1771.8. (a) (1) The Legislature finds and declares all of the following: 29
- (A) 30

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- 31 (1) The residents of continuing care communities have a unique and valuable perspective on 32 the operations of and services provided in the community in which they live. 34
- 35 (B)
- (2) Resident input into decisions made by the provider 36 is an important factor in creating an environment of 37 cooperation, reducing conflict, ensuring timely and response and resolution to issues that may arise.
- 40 (C)

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care retirement (3) Continuing communities strengthened when residents know that their views are heard and respected.

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(*b*) The Legislature encourages continuing care retirement communities to exceed the minimum resident participation requirements established by section by, among other things, the following:

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(1) Encouraging residents to form a resident council association, and assisting the residents, the resident council association, and resident association its governing 13 body to keep informed about the operation of the 14 continuing care retirement community.

(B)—

(2) Encouraging residents continuing of a 17 retirement community or their elected representatives 18 to select residents to participate as board members of the governing body of the provider.

(C)

(3) Quickly and fairly resolving any dispute, claim, or grievance arising between a resident and the continuing care retirement community.

(b)

(c) The governing body of a provider, the 26 designated representative of the provider, shall hold, at a minimum, semiannual meetings with the residents of continuing care retirement community, committee of residents the resident association or its government body, for the purpose of the free discussion 31 of subjects including, but not limited to, income, 32 expenditures, and financial trends and issues as they apply to the continuing care retirement community and 34 proposed changes in policies, programs, and services. 35 Nothing in this section precludes a provider from taking 36 action or making a decision at any time, without regard to the meetings required under this subdivision.

38 (c)

(d) At least 30 days prior to the implementation of any 39 40 increase in the monthly care fee, the designated SB 2077 **— 30 —**

representative of the provider shall convene a meeting, 2 to which all residents shall be invited, for the purpose of 3 discussing the reasons for the increase, the basis for determining the amount of the increase, and the data used for calculating the increase. This meeting may coincide with the semiannual meetings provided for in subdivision (b) (c).

(d) Residents

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governing body of a provider, (e) The the representative of the provider 10 designated provided provide residents with at least 14 days' advance 12 notice of each meeting provided for in subdivisions (b) 13 (c) and (e) (d). The governing body of a provider, or the 14 designated representative of the provider shall post the 15 notice of, and the agenda for, the meeting shall be posted 16 in a conspicuous place in the community at least 14 days 17 prior to the meeting. The agenda and accompanying 18 materials shall be governing body of a provider, or the 19 designated representative of the provider shall make 20 available to residents of the continuing care retirement 21 community upon request the agenda and accompanying materials at least seven days prior to the meeting.

(e)

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(f) Each provider shall make available to the resident 25 council association or its governing body, or if neither exists, if any, or to a committee of residents, a financial statement of activities comparing actual 28 budgeted costs broken down by expense category, not less than semiannually, and shall consult with the resident 30 council, if any, or, association or its governing body, or if neither exists to a committee of residents, during the annual budget planning process.

33 (f)

34 (g) Each provider shall, within 10 days after the annual 35 report required pursuant to Section 1790 is submitted to 36 the department, provide, at a central and conspicuous 37 location in the community, a copy of the annual report, including a copy of the annual audited financial 38 39 statement. but excluding personal confidential 40 information.

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provider (h) Each shall maintain, as public 3 information, available upon request residents, to prospective residents, and the public, minutes of the 5 board of director's meetings and shall retain these records 6 for at least three years from the date the records were filed or issued.

 $\frac{(h)}{(1)}$

(i) The governing body of a provider that is not part 10 of a multifacility organization with more than one continuing care retirement community in the state shall accept at least one resident of the continuing care retirement community it operates to participate as a 14 nonvoting resident representative to the provider's governing body.

(2)

- (j) In a multifacility organization having more than 18 one continuing care retirement community in the state, 19 the governing body of the multifacility organization shall 20 elect either to have at least one nonvoting resident 21 representative to the provider's governing body for each 22 California-based continuing care retirement community 23 the provider operates or to have a resident-elected 24 committee composed of representatives of the residents California-based continuing care retirement 25 of each community that the provider operates select or nominate at least one nonvoting resident representative to the provider's governing body for everv three 29 California-based continuing retirement care 30 communities or fraction thereof that the provider operates.
 - $\frac{(i)}{(1)}$
- (k) In order to encourage innovative and alternative 34 models of resident involvement, a resident selected pursuant to subdivision (h) (i) to participate as a resident 36 representative to the provider's governing body may, at the option of the resident council or association, be selected in any one of the following ways:

39 (A) SB 2077 **— 32 —**

(1) By a majority vote of the resident council or resident association of a provider or by a majority vote of resident-elected committee of residents multifacility organization.

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(2) If no resident council or resident association exists, any resident may organize a meeting of the majority of residents of the *continuing* care community to select or nominate residents to represent 10 them before the governing body.

(C)

12 (3) Any other method designated by the resident 13 council or resident association.

(2)

(1) The residents' council, resident association, 16 organizing resident, or in the case of a multifacility resident-elected 17 organization, the committee 18 residents, shall give residents of the continuing care 19 retirement community at least 30 days' advance notice of 20 the meeting to select a resident representative and shall 21 post the notice in a conspicuous place at the *continuing* 22 care retirement community.

(m) Except as provided in subdivision (k) (n), the 25 resident representative shall receive the same notice of board meetings, board packets, minutes, and materials as members and shall be permitted to attend, speak, and participate in all meetings of the board.

(k)

30 (n) Notwithstanding subdivision (j) (m), 31 governing body may exclude resident representatives 32 from its executive sessions and from receiving board 33 materials to be discussed during executive session. 34 However, resident representatives shall be included in 35 executive sessions and shall receive all board materials to discussed during executive sessions related 37 discussions of the annual budgets, increases in monthly 38 care fees, indebtedness, and expansion of new and existing 39 **facilities** continuing care retirement 40 communities.

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1 $\frac{(l)}{(l)}$

- 2 (o) The provider shall pay all reasonable travel costs for the resident representative.
 - (m)

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- 5 (p) The provider shall disclose in writing the extent of resident involvement with the board to prospective 6 residents.
 - (n)
- (q) Nothing in this section shall prohibit prohibits a 10 provider exceeding the minimum from resident participation requirements of this section by, 12 example, resident having more meetings more or 13 resident representatives to the board than required or by 14 having one or more residents on the provider's governing 15 body who are selected with the active involvement of 16 residents.
- 17 (0)

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- (r) On or before January 1, 2001, the Continuing Care Advisory Committee of the 20 established pursuant to Section 1777 shall evaluate and report to the Legislature on the implementation of this section.
- 23 SEC. 15. Section 1771.11 of the Health and Safety 24 Code is amended and renumbered to read:
 - 1771.11.
- 1771.10. Each provider shall adopt a comprehensive 26 27 disaster preparedness plan specifying policies 28 evacuation. relocation, continued services. organizational 29 reconstruction. structure. insurance 30 coverage, resident education, and plant replacement.
- SEC. 16. Section 1772 of the Health and Safety Code 31 32 is amended to read:
- 33 1772. (a) Except as otherwise provided in paragraph 34 (5) of subdivision (a) of Section 1788, no No report, 35 circular. public announcement, certificate. financial 36 statement, or any other printed matter or advertising material, or oral representation, that states or implies that 38 any an entity sponsors, guarantees, or assures ensures the performance of any continuing care contract, shall be 40 published or presented to any prospective resident unless

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the entity files with the department a written and legally sufficient document of acceptance of full financial responsibility for each continuing care contract. Each entity shall be listed as a provider on the certificate of authority and shall be cosigner on the continuing care 5 contracts. both of the following have been met: 6

- (1) Paragraph (5) of subdivision (a) of Section 1788 applies and the requirements of that paragraph have been satisfied.
- (2) The entity files with the department authorized and executed written declaration 12 accepts full financial responsibility for each continuing 13 care contract. The filing entity shall be subject to the 14 application requirements set forth in Article 15 (commencing with Section 1779), shall be a coobligor for 16 the subject contracts, and shall be a coprovider on the provisional applicable certificate of authority certificate of authority.
- (b) Implied sponsorship includes the use of the entity's 20 name of an entity for the purpose of implying that the entity's reputation may be relied upon to determine the 22 likelihood of success of the proposed ensure the performance continuing care of the retirement 24 community contract.

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(c) Any implication that the entity may be financially 27 responsible for these contracts may be rebutted by a 28 conspicuous statement, in each all continuing care contracts and marketing materials, that clearly 30 inform the transferor discloses to prospective residents and all transferors that the entity is not financially responsible.

(b)

34 (d) On written appeal to the department, and for good 35 cause shown, the department may, in its discretion, allow 36 an affinity group exemption from this section. If an exemption is granted, every continuing care contract 37 shall include a conspicuous statement which clearly 38 informs the transferor discloses to prospective residents **— 35 —** SB 2077

and all transferors that such entity is not financially 2 responsible.

(c)

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- (e) If the name of any an entity, including, but not 5 limited to, a religion, is used in connection with the development, marketing, or continued operation of a continuing care retirement community, but that entity does not actually own, control, manage, or otherwise operate the **facility** continuing care the providers 10 community, provider shall clearly disclose this lack of the absence of that affiliation, involvement, or association with the continuing care retirement community in the continuing care contract.
- 14 (d) All printed advertising materials, including brochures, circulars, public announcements, and similar 16 publications pertaining to continuing care shall identify the current status of the continuing care retirement 18 community as follows: (1) If a certificate of authority has not been issued, then specify whether the application for continuing care has been filed, permit to sell deposit subscriptions issued, or provisional certificate of authority issued.
 - (2) If a certificate of authority has been issued, specify the providers' certificate of authority number.
 - SEC. 17. Section 1772.2 is added to the Health and Safety Code, to read:
- 1772.2. (a) All advertising printed materials, circulars, 28 including brochures, public announcements, and similar publications pertaining to continuing care or a continuing care retirement community shall specify the number on the provider's provisional certificate authority or certificate of authority.
- (b) If the provider has not been issued a certificate of 34 authority, all advertising materials shall specify whether an application has been filed and, if applicable, that a 36 permit to accept deposits, or a provisional certificate of authority has been issued.
- 38 SEC. 18. Section 1773 of the Health and Safety Code 39 is amended to read:

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1773. No-(a) A provisional certificate of authority or certificate of authority has value for sale may not be sold, transferred, or exchange as property exchanged in any manner. No A provider shall may not sell or transfer 5 ownership of the continuing care retirement community 6 or enter into a contract with a third party entity for management of the continuing care retirement eommunity without the approval of the department.

- Violation Any violation of this section is grounds for 10 revocation of the certificate of authority shall cause the applicable provisional certificate of authority certificate of authority to be forfeited by operation of law 12 pursuant to subdivision (c) of Section 1793.7. 13
- (b) A provider may not enter into a contract with a 15 third party for overall management of the continuing 16 care retirement community without the approval of the department. The department shall review transaction for consistency with this chapter.
 - (c) Any violation of this section shall be grounds for revocation for the provider's provisional certificate of authority or certificate of authority under Section 1793.21.
 - SEC. 19. Section 1774 of the Health and Safety Code is amended to read:
 - 1774. Any No arrangement for which allowed by a permit to sell deposit subscriptions or accept deposits, a provisional certificate or authority, or a certificate of authority has been obtained shall not issued by the department under this chapter may be deemed a security for any purpose.
 - SEC. 20. Section 1775 of the Health and Safety Code is amended to read:
- 1775. (a) To extent that the this chapter. interpreted by the department, conflicts with the 34 statutes, regulations, or interpretations enforced by the 35 Department of Real Estate, this chapter as interpreted by 36 the department shall have precedence governing the sale or hire of real property, this chapter shall prevail.
- 38 (b) Notwithstanding any law or regulation to contrary, in any a provider for a continuing retirement community the provider may

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abridge the right of any resident, whether or not he the resident owns an equity interest, to sell, lease, encumber, or otherwise convey any interest in the resident's unit, and may require that the resident only sell, lease, or otherwise convey the interest to persons approved by the provider. Provider approval may be based on factors which include, but are not limited to, age, health status, insurance risk, financial status, or burden 9 provider's personnel, resources, or physical facility. Any The provider shall record any restrictions on a real 10 property interest shall be recorded by the provider. 12

(c) To the extent that this chapter conflicts with 13 Sections 51.2 and 51.3 of the Civil Code, this chapter shall 14 have precedence. A continuing care provider, at its discretion, may limit entrance based on age.

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- chapter imposes minimum (d) This requirements entity—undertaking the responsibility for upon promising to provide, proposing to promise to provide, or providing one or more elements of care to an elderly 20 person for the duration of his or her life or for a term in 21 excess of one year, in exchange for any prepayment or transfer of property prior to the services actually being rendered, whether or not the prepayment or transfer of property is supplemented with periodic or other payments continuing care.
 - (e) This chapter shall be liberally construed for the protection of persons attempting to secure their care for the remainder of their lifetime or for a period in excess of one year obtain or receiving continuing care.
- (f) A resident's entry into a continuing care contract described in this chapter shall be presumptive evidence 32 of the resident's intent not to return to his or her prior residence to live for purposes of qualifying for Medi-Cal 34 coverage under Sections 14000 et seq. of the Welfare and 35 Institutions Code and Section 50425 of Title 22 of the 36 California Code of Regulations.
- SEC. 21. Section 1776.6 of the Health and Safety Code 37 38 is amended to read:
- 39 1776.6. (a) Pursuant to the California Public Records Act (Chapter 3.5 (commencing with Section 6250) of

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- Division 7 of Title 1 of the Government Code) and the
- Information **Practices** Act of 1977 (Chapter
- (commencing with Section 1798) of Title 1.8 of Part 4 of
- 4 Division 3 of the Civil Code), the following documents
- 5 are public information and shall be provided by the
- department upon request: audited financial statements, 6 accompanying annual reports and documents.
- compliance 8 or noncompliance with reserve
- requirements, whether an application for Permit
- 10 permit to Sell Deposit Subscriptions accept deposits and
- 11 Certificate certificate of Authority authority has been
- 12 filed, whether a permit or certificate has been granted or
- denied, and the type of care offered by the provider. 13
- (b) Resident—The department shall regard resident 15 data used in the calculation of reserves shall be regarded 16 by the department as confidential.
- SEC. 22. Section 1777 of the Health and Safety Code 18 *is amended to read:*
- 1777. (a) The Continuing Care Contracts Advisory 19 20 Committee of the State Department of Social Services department shall act in an advisory capacity to the 21 continuing 22 department on matters relating to care 23 contracts.
 - (b) The members of the committee shall include:
- (1) Three representatives of nonprofit continuing 26 care providers pursuant to this chapter, each of whom shall have offered continuing care services for at least five 28 years prior to appointment. One member shall represent 29 a multifacility provider and shall be appointed by the 30 Governor in even years. One member shall be appointed 31 by the Senate Committee on Rules and shall be appointed 32 in odd years. One member shall be appointed by the Speaker of the Assembly and shall be appointed in odd 34 years.
- 35 (2) Three senior citizens who are not eligible for 36 appointment pursuant to paragraphs (1) and (4) who shall represent consumers of continuing care services, at 38 least two of whom shall be residents of continuing care retirement communities but not residents of the same provider. One senior citizen member shall be appointed

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by the Governor and shall be appointed in even years. One senior citizen member shall be appointed by the Senate Committee on Rules and shall be appointed in odd years. One member shall be appointed by the Speaker of the Assembly and shall be appointed in odd years.

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- (3) A certified public accountant with experience in the community continuing care industry, who is not a provider of continuing care services. This member shall be appointed by the Governor in even years.
- (4) A representative of a for-profit continuing care contracts pursuant to this chapter. This member shall be appointed by the Governor in even
- (5) An actuary. This member shall be appointed by the 15 Governor in even years.
- (c) Commencing January 1, 1997, all members shall 17 serve two-year terms and be appointed based on their 18 interest and expertise in the subject area. The Governor 19 shall designate the chairperson for the committee with 20 the advice and consent of the Senate. A member may be reappointed at the pleasure of the appointing power. He shall be the duty of the The appointing power to shall fill all vacancies on the committee within 60 days. These All members shall continue to serve until their successors are appointed and qualified.
- members of the committee (d) The shall 27 without compensation, except that each member shall be 28 paid from the Continuing Care Contract Provider Fee 29 Fund a per diem of twenty-five dollars (\$25) for each 30 day's attendance at a meeting of the committee not to 31 exceed six days in any month. The members of the 32 committee shall also receive their actual and necessary 33 traveling expenses incurred in the course of their duties. 34 Reimbursement of travel expenses shall be at rates not to exceed those applicable to comparable state employees 36 under Department ofPersonnel **Administration** regulations.
 - (e) Prior to commencement of service, each member shall file with the department a statement of economic interest and a statement of conflict of interest pursuant

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to Article 3 (commencing with Section 87300) of the Government Code.

- (f) If, during the period of appointment, any member no longer meets the qualifications of subdivision (b), that member shall submit his or her resignation to their appointing power and a qualified new member shall be appointed by the same power to fulfill the remainder of
- 9 SEC. 23. Section 1777.2 of the Health and Safety Code 10 is amended to read:
- 11 1777.2. (a) The Continuing Care Contracts Advisory 12 Committee shall:
- (1) Review the financial and managerial condition of 14 each continuing care retirement community 15 *communities* operating under a certificate of authority.
- (2) Review the financial condition of any continuing 17 care retirement community that the committee 18 determines is indicating signs of financial difficulty and may be in need of close supervision.
- (3) Monitor the condition of-continued 21 continuing care retirement communities—as that the department or the chair of the committee may direct 23 request.
- (4) Make available consumer information on the 25 selection of continuing care contracts and necessary contract protections in the purchase of continuing care contracts.
- (5) Review new applications regarding financial. 29 actuarial, and marketing feasibility as requested by the 30 department.
- (6) The Continuing Care Contracts Committee of the 32 department, in consultation with residents and providers shall, by December 31, 1997, advise the department of its 34 suggestions to protect continuing care retirement 35 communities and residents from the financial 36 consequences caused by earthquakes and other natural disasters. This paragraph shall become inoperative on January 1, 1998.
- (b) The committee shall make recommendations to 39 40 the department regarding needed changes in its rules

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regulations and upon request provide advice and regarding the feasibility of new continuing retirement communities and the correction of problems 4 relating to the management or operation of continuing care retirement community. The committee shall also perform any other advisory functions necessary to improve the management and operation of continuing care retirement communities.

(c) The committee may report its 10 recommendations directly to the director of the department.

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- 12 (d) The committee may hold meetings, as deemed 13 necessary to the performance of its duties.
- SEC. 24. Section 1777.4 of the Health and Safety Code 15 is amended to read:
- 1777.4. Any member of the Continuing 17 Contracts Advisory Committee is immune from civil 18 liability based on acts performed in his or her official 19 capacity. Costs of defending civil actions brought against 20 a member for acts performed in his or her official capacity 21 shall be borne by the complainant. However, nothing in this section immunizes any member for acts or omissions performed with malice or in bad faith.
- SEC. 25. Section 1779 of the Health and Safety Code 25 is amended to read:
- 1779. (a) An entity shall file an application for a 27 permit to sell deposit subscriptions accept deposits and 28 for a certificates of authority — shall be filed with the 29 department, as set forth in this chapter, in any of the 30 following circumstances before doing any of the 31 *following*:
- (1) Prior to entering into any continuing care 33 contracts or any deposit subscription agreements. 34 Accepting any deposit, reservation fee, or any other 35 payment that is related to a promise or proposal to 36 promise to provide continuing care.
- (2) Prior to initiating construction of a prospective 38 continuing care retirement community.—Entering reservation agreement, deposit agreement, continuing care contract.

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- (3) Prior to initiating construction on a new phase or expansion of an existing continuing care retirement community. An expansion has occurred when there is an 4 increase in Residential Care Facility for the Elderly 5 license capacity, an increase in the number of units at the continuing care retirement community, an increase in 6 the number of skilled nursing beds, or additions to or replacement of existing continuing care retirement community structures that affects obligations to current 10 residents. The department may waive all or portions of the application content requirements under Section 12 1779.4 for an expansion of an existing continuing care 13 retirement community. Commencing construction of a 14 prospective continuing care retirement community. If the project is to be constructed in phases, the application 15 shall include all planned phases. 16
- (4) Prior to converting an existing structure to a continuing care retirement community. Expanding an existing continuing care retirement community whether 20 by converting existing buildings or by new construction.
- (5) Prior to recommencing marketing on a planned 22 facility when the applicant has previously forfeited a permit to sell deposit subscriptions pursuant to Section 24 1793.7. Converting an existing structure to a continuing 25 care retirement community.
- (6) Prior to executing new continuing care contracts 27 after a provisional or final certificate of authority has been 28 inactivated, revoked, surrendered, or forfeited. Recommencing marketing on a planned continuing care community 30 retirement when the applicant previously forfeited a permit to accept deposits pursuant to Section 1703.7.
- (7) Prior to closing the sale or transfer of a continuing 34 care retirement community. Executing new continuing 35 care contracts after a provisional certificate of authority 36 or certificate of authority has been inactivated, revoked, surrendered, or forfeited.
- (8) Closing the sale or transfer of a continuing care 38 or assuming responsibility for 39 retirement community 40 continuing care contracts.

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(b) If the provider undergoes an organizational 2 change, including, but not limited to, a change in structure, separation, or merger, a new application shall 4 be required and a new certificate of authority must be 5 issued by the department before any continuing care contracts may be executed by the new entity.

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- (e) A new application is not required for an entity name change if there is no change in the entity structure or management. If the provider undergoes a name 10 change, the provider shall notify the department of the name change and shall return the previously issued certificate of authority for reissuance under the new corporate name.
- (d) For purposes of paragraph (4) of subdivision (a), 15 an expansion of a continuing care retirement community shall be deemed to occur when any of the following occurs:
 - (1) An increase in the capacity stated on the residential care facility for the elderly license issued to the continuing care retirement community.
 - (2) An increase in the number of units at the continuing care retirement community.
- (3) An increase in the number of skilled nursing beds, 24 or additions to, or replacement of, existing continuing 25 care retirement community structures that may affect obligations to current residents.
- (c) Any provider that alters, or proposes to alter, its 28 organization, including by means of a change in the type of entity it is, separation from another entity, merger, 30 affiliation, spinoff, or sale, shall file a new application and obtain a new certificate of authority before the new entity 32 may enter into any new continuing care contracts.
- (d) A new application shall not be required for an 34 entity name change if there is no change in the entity 35 structure or management. If the provider undergoes a 36 name change, the provider shall notify the department in writing of the name change and shall return the 38 previously issued certificate of authority for reissuance under the new name.

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(e) Within 10 days of submitting an application for a certificate of authority pursuant to paragraph (3)—or, (4), (7), or (8) of subdivision (a), the provider shall notify 4 residents of the *provider's* existing community 5 communities of its application—for a permit. The provider shall notify the resident's council or association of any plans filed its resident associations of any filing with the department to obtain new financing, additional financing for the facility a continuing care retirement community, 10 the sale or transfer of a continuing care retirement community facility, any change in structure, and of any applications to the department for any expansion of the 12 13 facility a continuing care retirement community. A 14 summary of the plans and application shall be posted in 15 a prominent location in the facility continuing care 16 retirement community so as to be accessible to all residents and the general public, indicating in 17 18 summary where the full plans and application may be inspected in the facility continuing care retirement 20 community. 21

- (f) When the department determines that it has 22 sufficient information on the provider or determines that 23 the provisions do not apply and the protections provided 24 by this article are not compromised, the department may 25 eliminate all or portions of the application contents 26 required under Section 1779.4 for applications filed 27 pursuant to paragraphs (4), (5), (6), (7), and (8) of subdivision (a) or pursuant to subdivision (c).
- SEC. 26. Section 1779.2 of the Health and Safety Code 30 is amended to read:
 - 1779.2. (a) A formal application shall be made by a person or organization to the department for a permit to sell deposit subscriptions and certificate of authority, as provided in this chapter.
- (b) A separate application shall be required for each 36 proposed project which includes all planned phases.
 - (e) The application shall be signed under penalty of perjury by the applicant. If the applicant is a corporation, the chief executive officer shall sign the application and certify that to the best of his or her knowledge and belief,

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the items are correct. If the applicant is a partnership, each general partner shall sign the application and certification. If there are multiple applicants, the above requirements apply to each.

(d) An application fee shall be required whenever a provider applies Any entity filing an application for a permit to sell deposit subscriptions and accept deposits or a certificate of authority shall pay an application fee.

The application fee shall be calculated and submitted 10 to the department as follows:

(1) Each application shall be accompanied by payment to the Continuing Care Provider Fee Fund of 80 percent of the application fee for all currently planned phases. Processing of the application shall not begin until this fee is received.

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- (b) The applicant shall pay 80 percent 18 application fee for all planned phases at the time the application. applicant submits its The80 percent 20 payment shall be made by check payable 21 Continuing Care Provider Fee Fund. The department shall not process the application until it has received this
- (c) For new continuing care retirement communities 25 or for the sale or transfer of existing continuing care 26 retirement communities, the application fee is shall be calculated as one-tenth of 1 percent of the purchase price 28 of the continuing care retirement community, or the estimated construction cost, including the purchase price 30 of the land or the present value of any long-term lease and all items listed in subparagraph (D) of paragraph (2) of subdivision (y) of Section 1779.4.

(B)

34 (1) For existing continuing retirement care 35 communities that are proposing new phases, remodeling 36 or an expansion, the application fee is shall be calculated as one-tenth of 1 percent of the cost of the addition, annexation, or renovation, including the cost value of the 38 improvements land and and all items listed

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subparagraph (D) of paragraph (2) of subdivision (y) of Section 1779.4.

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- (2) For existing facilities converting to continuing 5 care retirement communities, the application fee is shall be calculated as one-tenth of 1 percent of the current appraised value of the facility, including the land, or present value of any long-term lease.
- (2) Payment to the Continuing Care Provider Fee 10 Fund of
- (3) For organizational changes, the application fee shall be determined by the department based on the time and resources it considers reasonably necessary to process 14 the application, including any consultant fees. The 15 minimum application fee for those applications shall be 16 two thousand dollars (\$2,000).
- (d) The applicant shall pay the remainder of the 18 application fee shall be made at or before the time of issuance of the provisional certificate of authority is 20 issued, or in the case of expansions or remodeling, before 21 final approval of the project is granted. The applicant 22 shall make this payment by check payable to the 23 Continuing Care Provider Fee Fund. The application fee 24 shall be calculated as one-tenth of 1 percent of the 25 purchase price of the continuing care retirement 26 community, or the actual construction cost, including the purchase price of the land or the present value of any long-term lease, less the payment included with the application. The provisional certificate of authority shall not be issued until the balance of the fee is paid.
- 31 SEC. 27. Section 1779.4 of the Health and Safety Code 32 is amended to read:
- 33 1779.4. An application shall contain all the of 34 following:
- 35 (a) A statement signed by the applicant under penalty 36 of perjury certifying that to the best of the applicant's knowledge and belief, the items submitted in the application are correct. If the applicant is a corporation, the chief executive officer shall sign the statement. If

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- there are multiple applicants, these requirements shall apply to each applicant.
 - (b) The name and business address of the applicant.
- 4 (b)

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- 5 (c) An itemization of the total fee calculation, 6 including sources of figures used, and a check in the amount of 80 percent of the total application fee.
- 9 (d) The name, address, and a description of the real 10 property of the continuing care retirement community.
 - (d) The estimated
- 12 (e) An estimate of the number of continuing care 13 residents of at the continuing care retirement 14 community.
- 15 (e)
- 16 (f) A description of the proposed continuing care 17 retirement community, including the services and care to 18 be provided to residents or available for residents—or 19 provided to residents, or both. 20
 - (f)

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- (g) A statement indicating whether the application is 22 for a certificate of authority to enter into continuing care 23 or life care contracts.
 - (g) Documentation evidencing
- (h) A license to operate the proposed continuing care 26 retirement community as a residential care facility for the 27 elderly or documentation establishing that the applicant 28 has received a preliminary approval for licensure from 29 the department's Community Care Licensing Division of 30 the State Department of Social Services or Division.
- (i) A license to operate the proposed skilled nursing 32 facility or evidence that an application has been filed with 33 the Licensing and Certification Division of the State 34 Department of Health Services, as appropriate 35 applicable.
- 36 (h)
- (j) If the applicant is an individual, a statement 37 38 disclosing any revocation or other disciplinary action taken, or in the process of being taken, against a license,

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permit, or certificate held or previously held by the applicant. 3

(i)

4 (k) A description of any matter in which any principal 5 interested party involved with the proposed continuing 6 care retirement community has been convicted of a felony or pleaded nolo contendere to a felony charge, or been held liable or enjoined in a civil action by final judgment, if the felony or civil action involved fraud, fraudulent 10 embezzlement. conversion. misappropriation of property. For the purpose of this 12 subdivision, "principal" means "interested party" 13 includes any representative of the developer 14 proposed continuing care retirement community or the 15 applicant, including a all general partners, chief 16 executive officers, or chief operating officer 17 officers and board members of corporations; and 18 managing members and managers of limited liability companies for each entity; who significant has 20 decisionmaking authority with respect to the proposed 21 continuing care retirement community.

22 (i)

- 23 (1) If the applicant is an entity other than 24 individual, the following information shall also shall be 25 submitted:
- (1) A statement identifying the type of legal entity and 27 listing the interest and extent of the interest of each principal in the legal entity. For the purposes of this 29 paragraph, "principal" means any person or entity 30 having a financial interest in the legal entity of 10 percent 31 or more. When the application is submitted in the name 32 of a corporation, the parent, sole corporate shareholder, or sole corporate member who controls the operation of 34 the continuing care retirement community shall be listed as an applicant. When multiple corporate applicants exist, 36 they shall be listed jointly by corporate name on the application, and the certificate of authority shall be issued 38 in the joint names of the corporations. When application is submitted by a partnership, all general partners shall be listed named as applicants coapplicants

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and the department shall name them as coproviders on any certificate of authority shall be issued in the joint names of the general partners it issues.

- (2) The names of the members of the board of directors, the trustees, the general partners, or other responsible officers of the legal entity provider's governing body.
- (3) A statement as to indicating whether the applicant was or is affiliated with a religious, charitable, nonprofit 10 or for-profit organization, and the extent of any affiliation. The statement shall also include the extent, if any, to 12 which the affiliate organization will be responsible for the 13 financial and contract obligations of the applicant and shall be signed by a responsible officer of the affiliate organization.
 - (4) A statement identifying any parent corporation entity or other affiliate eorporation entity, the primary activities of each entity identified, the relationship of each entity to the applicant, and the interest in the applicant held by each entity.
- (5) Copies of all contracts, management agreements, 22 or other documents setting forth the relationships of the 23 with each of the other entities.
- (6) A statement as to indicating whether applicant, a principal, a parent entity, affiliate entity, or subsidiary corporation entity, any other affiliate entity, any responsible employee, manager, or board member, or anyone who otherwise profits from the continuing care retirement community has had applied against it any injunctive or restrictive order of a court of record, or any suspension or revocation of any state or federal license, permit, or certificate, arising out of or relating to business activity of health or nonmedical care, including, but not 34 limited to, actions affecting a license to operate a health care institution, nursing home, intermediate care facility, hospital, home health agency, residential care facility for the elderly, community care facility, or child day care facility.

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(m) A description of the business experience of the applicant applicants in the operation or management of similar facilities.

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(n) A copy of any advertising material regarding the continuing retirement care community prepared for distribution or publication.

- (o) Evidence of the bonds required by Section 1789.8.
- (n) Copies of the proposed continuing care contracts 11 to be entered into with residents of the continuing care retirement community.

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- (p) A copy of any proposed reservation agreement.
- (q) A copy of the proposed deposit subscription 16 agreement form agreements.

(p)

- (r) The name of the proposed escrow agent and 18 19 depository.
- 20 (q) Copies
- (s) Any copies of all reservation and deposit escrow 22 account agreements.

- 24 (t) A copy of any proposed continuing care contracts.
- (u) A statement of any periodic monthly care fees to 26 be paid by residents, the components and services 27 considered in determining such fees, and the manner by 28 which the provider may adjust these fees in the future. If 29 the continuing care retirement community is already in 30 operation, or if the provider operates one or more similar 31 continuing care retirement communities within 32 state, the statement shall include tables showing the in periodic 33 frequency and each percentage increase 34 monthly care rates at each continuing care retirement 35 community for the previous five years, or any shorter 36 period for which each continuing care retirement 37 community may have been operated by the provider or 38 his or her predecessor in interest.

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(v) (1) A statement of the provisions actions that have been made, or will be made, taken by the applicant to provide reserve funding or security by the provider to 4 enable the provider fund reserves as required by Section 5 1792.2 or 1793 and to otherwise ensure that the applicant 6 will have adequate finances to fully perform his or her obligations pursuant to continuing care contracts, including, but not limited to, the establishment of escrow accounts in financial institutions, trusts, or reserve funds 10 contract obligations.

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- (2) The statement shall describe actions such as establishing restricted accounts, sinking funds, trust 14 accounts, or additional reserves.
- purchasing (3) If the applicant is an existing 16 continuing care retirement community from a selling provider, the applicant shall provide an actuarial report 18 to determine the liabilities of existing continuing care 19 contracts and demonstrate the applicant's ability to fund 20 those obligations.
- (w) A copy of audited financial statements for the 22 three most recent fiscal years of the applicant or any 23 shorter period of time the applicant has been in existence, 24 prepared in accordance with generally accepted accompanied 25 accounting principles and by 26 independent auditor's report from a reputable firm of public accountants. The audited statements shall be accompanied by a statement signed and dated by both the chief financial officer and chief identified corporation, or 30 executive officer for the applicant or, if applicable, by each general partner, or 32 each managing member and manager, stating that the financial statements are complete, true, and correct in all 34 material matters to the best of their knowledge.

(u)

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(x) Unaudited interim financial statements shall 37 included if the applicant's fiscal year ended more than 90 days prior to the date of filing. The statements shall be either quarterly or monthly, and prepared on the same basis as the annual audited financial statements or any **SB 2077**

other basis acceptable to the department. The period between the end of the most recent fiscal year for which audited financial statements are submitted and a date not more than 90 days prior to the date the application is filed shall be covered in the unaudited interim financial 5 6 statements.

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- (y) A financial study and a marketing feasibility study that reasonably project the feasibility of the proposed 10 continuing care retirement community and are prepared by a firm or firms acceptable to the department. The 12 study shall include or address, as appropriate These studies shall address and evaluate, at a minimum, all of the 14 following items:
- (1) A narrative describing the The applicant and its qualifications, 16 prior experience, and management, including a descriptive analysis detailed description of applicant's proposed continuing care retirement community—and, its service package, fee structure, and anticipated opening date.
- (2) A narrative describing the financing and The construction 22 construction plans, financing, 23 permanent financing for the proposed continuing care community, including 24 retirement a statement 25 description of the anticipated source—and application of 26 the, cost, terms, and use of all funds to be used in the purchase, lease, rental, or land acquisition, construction, and operation of the continuing care retirement community. This statement proposal shall include, but 30 not be limited to at a minimum, all of the following:
- (A) A description of any mortgage loan or other 32 long-term financing intended to be used for the financing of all debt to be incurred by the applicant for the 34 continuing care retirement community, including the anticipated terms and costs of the financing. This The 36 applicant's outstanding indebtedness shall related to the 37 continuing care retirement community may not, at any 38 time, exceed the appraised value of the continuing care 39 retirement community.

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(B) Equity—A description of the source and amount of the equity to be contributed by the applicant.

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- (C) Other sources of funds, A description of the source and amount of all other funds, including entrance fees, if applicable that will be necessary to complete and operate the continuing care retirement community.
- (D) An estimate of the cost of purchasing, leasing, renting, designing, or constructing and equipping the continuing care retirement community, including, but 10 not limited to, financing expense, legal expense, land costs, occupancy development costs, and A statement itemizing all estimated project costs, including the real 13 property costs and the cost of acquiring or designing and 14 constructing the continuing care retirement community, 15 and all other similar costs that the provider expects to 16 incur, or become obligated for, prior shall commencement of operation. This itemization 18 identify all cost related to the continuing care retirement community or project, including financing 20 legal expenses, occupancy development costs, marketing costs, and furniture and equipment.
- (E) Interest—A description of the interest expense, 23 insurance premiums, and property taxes that will be incurred prior to opening.
 - (F) An estimate of any proposed continuing retirement community reserves required for items such as debt service, insurance premiums, and operations.
- (G) An estimate of any funds that are anticipated to the amount of funds, if any, that will be necessary to fund startup losses, fund statutory and refundable contract reserves, and to assure otherwise provide additional financial resources in an amount sufficient to ensure full performance of the obligations of by the provider 34 pursuant to of its continuing care contracts, including, but not limited to, any reserve fund escrow obligations.
- (3) An 37 analysis of the potential market for the applicant's continuing community, 38 care retirement addressing such items as:

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(A) Service—A description of the service area, including its demographic, economic, and growth characteristics.

- (B) Forecasts of A forecast of the market penetration 5 the continuing care retirement community will achieve based on the proposed fee structure.
 - (C) Existing and planned competition in and about the primary service area.
- (4) A detailed description of the sales and marketing 10 plan, addressing such items as including all of the following:
 - (A) Marketing schedule projections, anticipated sales, and cancellation rates.
- (B) Month-by-month forecast of unit sales through 15 sellout.
- (C) A marketing plan describing description of the marketing methods, staffing, and advertising media to be 18 *used by the applicant.*
- (D) An estimate of the total entrance fees to be 20 received from residents prior to completion of occupancy opening the continuing care retirement community.
- (5) Projections of Projected move-in rates, deposit 23 subscription fee collections, and resident profiles, including couple mix by unit type, age distribution, care and nursing unit utilization, and unit turnover or resale rates.
- (6) A description or analysis of development-period 28 costs and revenues. This item should be provided to the department on a quarterly basis, throughout development of the proposed continuing care retirement community.

(w)

- (z) Projected annual financial statements for a the 34 period commencing on the first day of the first applicant's 35 current fiscal year, following the most recent year for 36 which an audited financial statement has been provided, through at least the fifth year of operations operation.
 - (1) The projected Projected annual financial statements shall be prepared on an accrual basis using the accounting principles and procedures

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audited financial statements furnished pursuant paragraph (u), but need not be audited subdivision (x).

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- (2) Separate projected annual cash-flow statements 4 shall be provided. The These statements shall cover the entire show projected annual cash flows for the duration of any debt, and be presented on a quarterly basis during the preopening, construction, and fill-up periods associated with thecontinuing care retirement community. If the real continuing care retirement 10 community property is leased, the cash-flow statement shall project demonstrate the feasibility of closing the continuing care retirement community at the end of the lease period.
- (A) The projected annual cash-flow statements shall 15 be submitted, using prevailing rates of interest, with and 16 assume no increase of revenues and expenses due to inflation, as one set of assumptions.
- (B) The projected annual cash-flow statements shall 19 include *all of* the following:
- (i) A detailed listing, including description and a full 21 explanation of all assumptions used in preparing the projections, plus accompanied by supporting 23 supplementary schedules and calculations, all to be 24 consistent with the financial study and marketing 25 feasibility study furnished pursuant to paragraph (v), as subdivision (y). The department may be required by the department for use in evaluating the feasibility of the proposed continuing care retirement community require 29 such other supplementary schedules, calculations, or 30 projections as it determines necessary for an adequate application.
- (ii) Cash flow from monthly operations, including, but 33 not limited to, showing projected revenues for monthly 34 fees received from continuing care contracts, medical unit fees if applicable, other periodic fees, and gifts and 36 bequests used in operations, and any other projected source of revenue from operations less operating expenses.
- (iii) Contractual cash flow from activities, including, 39 40 but not limited to, showing projected revenues from

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presales, deposit subscription receipts, and entrance fee receipts fees, and all other projected sources of revenue 3 from activities, less contract acquisition, marketing, and 4 advertising expenditures.

- (iv) Cash flow flows from financing 6 including, but not limited to, bond or loan proceeds less bond issue or loan costs and fees, debt service including premiums, Mortgage Insurance principal and interest payments, leases, contracts, rental 10 agreements, or other long-term financing.
- (v) Cash flow flows from investment activities, 12 including, but not limited to. construction progress 13 payments, architect and engineering services. 14 furnishings, equipment not included in the and construction contract, project development, inspection 15 16 and testing, marketable securities, investment earnings, and interfund transfers.
- (vi) Increase The increase or decrease in cash during 19 the projection period.
- (vii) The beginning cash balance, which means cash, 21 marketable securities, reserves, and other funds on hand, available, and committed to the proposed continuing 23 care retirement community.
 - (viii) Cash The cash balance at the end of the period.
- (ix) Details of the components of the ending cash 26 balance shall be provided for each period presented, 27 including, but not limited to, the ending cash balances for bond reserves, other reserve funds, deposit subscription funds, and construction funds balance.
- (3) If cash-flow statements required the subparagraph (B) paragraph (2) indicate provider will have cash balances exceeding two months' projected operating expenses of the continuing 34 retirement community, a description of the manner in 35 which the cash balances will be invested, and the persons 36 who will be making the investment decisions, shall accompany the application.
 - (4) The applicant shall furnish further explanatory information, schedules, and calculations as required by the department on actuarial data used to project

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1 occupancy rate, unit type and couple mix, sex, age, and 2 turnover, refund and sales rate subscription collection 3 rates, a detailed—The department may require to furnish additional data 4 applicant regarding its 5 operating budgets, and projections of cash required for major repairs and improvements, or on any other factor considered during the projected periods 8 matter related to its projections including additional 9 information, schedules, and calculations regarding 10 occupancy rate projections, unit types, couple mix, sex and age estimates for resident mix, turnover rates, refund obligations, and sales. 12

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(aa) (1) A declaration by the applicant 15 acknowledging the requirement of executing and 16 recording that it is required to execute and record a 17 Notice of Statutory Limitation on Transfer (hereinafter 18 referred to as the notice), relating to continuing care 19 retirement community property pursuant to this section.

(1) The

The notice required in this subdivision shall be 22 acknowledged so as to entitle it to be recorded and 23 suitable for recordation, describe the property,—and declare the applicant's intention to use all or part of the described property for the purposes of a continuing care retirement community pursuant to this chapter, and shall be in substantially the following form:

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NOTICE "NOTICE OF STATUTORY LIMITATION ON TRANSFER

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Notice is hereby given that the property described below is licensed, or proposed to be licensed, for use as a continuing care retirement community and accordingly, the use and transfer of the property is subject to the 36 conditions and limitations as to use and transfer set forth 37 in Sections 1773 and 1789.4 of the Health and Safety Code. 38 This notice is recorded pursuant to subdivision (x) (aa) of Section 1779.4 of the Health and Safety Code.

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The real property, which is legally owned by (insert the name of the legal owner) and is the subject of the statutory limitation to which this notice refers, is more particularly described as follows: (Insert the legal description and the assessor's parcel number of the real property to which this notice applies.)"

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- (2) The notice Notice of Statutory Limitation on Transfer shall remain in effect until notice of release is 10 given by the State Department of Social Services 11 Continuing Care Contract Branch department. The State 12 Department of Social Services Continuing Care 13 Contracts Branch department shall execute and record a 14 release of the notice upon proof of complete performance 15 of all obligations to transferors residents.
- (3) Unless a notice Notice of Statutory Limitation on 17 Transfer has—already been recorded with respect to the 18 land on which the applicant or provider is operating, or to operate continuing care retirement a 20 community, prior to the date of execution of any trust 21 deed, mortgage, or any other lien or encumbrance 22 securing or evidencing the payment of money 23 affecting land on which the applicant or provider intends to operate a continuing care retirement community, the applicant or provider shall give the department advance written notice of the proposed encumbrance. Upon the giving of notice to the department, the applicant or 28 provider shall execute and record the Notice of Statutory 29 Limitation on Transfer in the office of the county 30 recorder in each county in which any portion of the 31 continuing care retirement community is located prior to 32 encumbering the continuing care retirement community 33 property with the proposed encumbrance.
- (4) In the event that the applicant or provider and the 35 owner of record are not the same entity or individual on 36 the date on which execution and recordation of the notice 37 is required, the leasehold or other interest in the 38 continuing care retirement community property held by the applicant or provider shall survive in its entirety and without change, any transfer of the continuing care

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1 retirement community property bvthe owner. In addition, the applicant or provider shall record a 3 memorandum of leasehold or other interest in the continuing care retirement community property 5 includes a provision stating that its interest in the 6 property survives any transfer of the property by the owner. The applicant or provider shall serve provide a copy of the notice on and the memorandum of interest to the owner of record by certified mail and to the department. 10 11

(5) The notice shall, and, if applicable, the 12 memorandum of interest shall be indexed by the recorder in the grantor-grantee index to the name of the owner of record and the name of the applicant or provider.

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(ab) A statement that the applicant will keep the department informed of any material changes to the 18 proposed continuing care retirement community plan as reflected in the or its application form and attachments.

- (ac) Any other information as that may be required by department for the proper administration enforcement of this chapter.
- SEC. 28. Section 1779.6 of the Health and Safety Code 25 is amended to read:
 - 1779.6. (a) Within seven calendar days of receipt of an initial application for a permit to sell deposit subscriptions accept deposits and *a* certificate authority, the department shall acknowledge receipt of the application in writing.
- (b) Within 30 calendar days of following its receipt of 32 an application, the department shall determine if the application is complete and inform the applicant of its determination. If the department determines that the 34 application is incomplete, its notice to the applicant shall 35 36 identify the additional forms, documents, information, 37 and other materials required to complete the application. 38 The department shall allow the applicant adequate time 39 to submit the requested information and materials. This 40 review need may not include a review of the determine

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the adequacy of the documentation submitted materials included in the application. Based on this review, the department shall do one of the following:

- (1) Notify the applicant of additional forms, documents, information, or materials required to comprise a complete application and allow the applicant adequate time to submit the requested information or materials.
- (2) Determine that the application is complete as 10 submitted.
- (c) Within 120 calendar days after the department determines application that is complete. an department shall review the application for adequacy. An 13 14 application shall be adequate if it complies with all the 15 requirements imposed by this chapter, and both the 16 financial study and marketing study reasonably project 17 the feasibility of the proposed continuing care retirement well as demonstrate 18 community, as the financial 19 soundness of the applicant. The department shall aet to or determine the 20 either approve the application application is inadequate, as adequate under this chapter or notify the applicant of the specific deficiency and that application is inadequate. If the application 23 *its* department 24 inadequate, the shall identify deficiencies in the application, provide the appropriate code references, and give the applicant an opportunity to respond.

During this period, the department shall do all of the

- (1) Review the application for adequacy.
- (2) Review the application for compliance with this chapter.
 - (3) Review the financial plan for feasibility.
- (4) If necessary, request expert consultants to review portions of the application and advise the department of 36 their opinions.
- (d) Within 30 60 calendar days after its receipt of 37 38 receiving additional information or clarification any applicant, 39 required from the the department respond applicant's submission 40 to the

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including its determination and state whether each specific deficiency has been addressed and whether 3 sufficiently to make the application is adequate. If the 4 department determines that the application is adequate and in compliance with this chapter, the department shall act to issue the permit to sell deposit subscriptions accept deposits. If the department determines that the response is inadequate, it may request additional information or clarification from the applicant pursuant to subdivision 10 (c) or deny the application pursuant to Section 1779.10.

(e) If the applicant does not provide the department 12 with the additional information within 90 days after the department's notice described in subdivision (c), the application may be denied for being inadequate. Any 15 new application shall require an application fee.

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SEC. 28.5. Section 17797.7 is added to the Health and Safety Code, to read:

17797.7. (a) Where any portion of the consideration 19 transferred to an applicant as a deposit or to a provider 20 as consideration for a continuing care contract is 21 transferred by a person other than the propective 22 resident or a resident, that third-party transferor shall 23 have the same cancellation or refund rights as the 24 prospective resident or resident for whose benefit this 25 consideration was transferred.

- (b) A transferor shall have the same rights to cancel 27 and obtain a refund as the depositor under the deposit agreement or the resident under a continuing care contract.
- 30 SEC. 29. Section 1779.8 of the Health and Safety Code 31 is amended to read:
- 1779.8. (a) The applicant shall notify the department of material changes in the application information submitted by the applicant to the department in the application materials, including the applicant's financial 36 and marketing projections.
 - (b) No less than 60 calendar days prior to an An applicant making shall provide to the department at least 60 days' advance written notice of any proposal to make any changes in the applicant's corporate name, structure,

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1 organization, operation, or financing, the applicant shall give written notice of these proposed changes to the 3 department. This notice requirement does not apply to mere facility staff changes.

- (c) Within 30 calendar days after receiving notice of 6 the proposed change a change affecting the applicant or the application, the department shall inform advise the applicant of any applicant:
- (1) Whether additional or amended information 10 needed is required to process the pending application, or whether application.
 - (2) Whether an additional application fee is required.
- (3) Whether a new application and application fee 14 must be submitted. The new application fee shall be twice 15 the actual cost of additional—consultant review time 16 caused by the change. This additional fee is payable to the department on demand.
- (d) Failure—The department shall suspend 19 applicant's application and, if applicable, its permit to 20 accept deposits if the applicant fails to give written notice 21 of changes required by this section shall result in 22 suspension of the permit to sell deposit subscriptions, 23 pending the outcome of an investigation by section. The 24 suspension shall remain in effect until the department 25 into the effect has both assessed the potential impact of 26 the changes on the interests of the subscribers depositors and taken such action as necessary under this chapter to protect these interests.
- SEC. 30. Section 1779.10 of the Health and Safety 30 Code is amended to read:
- 1779.10. (a) The department shall 32 application for a permit to sell deposit subscriptions and accept deposits and a certificate of authority if any of the 34 following exists the applicant fails to do any of the following:
- (1) Failure to pay—Pay the application fee as required 36 37 by Section 1779.2.
- (2) Failure to submit Submit all information required 38 39 by this chapter.

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(3) Failure to submit Submit evidence to support a reasonable belief that any principal interested party of the proposed continuing care retirement community who has committed any offenses listed in subdivision (i) (k) of Section 1779.4 is of such good character as to indicate rehabilitation.

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- (4) If an action specified in subdivision (h) or (j) of Section 1779.4 has been taken against an applicant and the applicant has failed to submit Submit evidence to support 10 a reasonable belief that the applicant is capable of administering the continuing care retirement community in compliance with applicable laws regulations when an action specified in subdivision (j) or 14 (k) of Section 1779.4 has been taken against the applicant.
- (5) Failure to demonstrate Demonstrate 16 feasibility of the proposed continuing care retirement community plan.
 - (6) Comply with residential care facility for elderly licensing requirements.
 - (b) If the application is denied, the previously no portion of the paid application fee shall not be refundable or refunded.
 - (c) Immediately upon the denial of an application, the department shall notify the applicant in writing.
- (d) The Notice of Denial from the department shall 25 contain all of the following: 26
 - (1) State A statement that the application is denied.
 - (2) List the reasons The grounds for the denial.
- (3) Explain—A statement informing the applicant that 30 it has the right of to appeal.
 - (4) State—A statement that the applicant has calendar days from the date that the Notice of Denial was mailed to appeal the denial, and where to send the appeal.
- 35 (e) If applicant appeals the denial. further the 36 proceedings shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of
- 38 Division 3 of Title 2 of the Government Code.
- 39 SEC. 31. Section 1780 of the Health and Safety Code is amended to read:

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1780. The department shall issue a permit to sell deposit subscriptions accept deposits when it has done all of the following:

- (a) Determined application is that the complete 5 adequate.
 - (b) Determined that the proposed continuing care community financial and retirement marketing and feasibility plans studies are acceptable.
- (c) Reviewed and approved the deposit subscription 10 agreement agreements.
 - (d) Reviewed and approved the deposit escrow account agreement.
- SEC. 32. Section 1780.2 of the Health and Safety Code 14 *is amended to read:*
- 1780.2. (a) A deposit subscription may be made paid 16 in one or several payments, to begin at or after the time the parties enter into the deposit subscription agreement.
- A deposit subscription shall be paid by cash or cash 19 equivalent, jointly payable to the applicant and the 20 escrow agent or depository. Possession and control of any such instrument must shall be transferred to the escrow agent at the time the deposit is paid.
- (b) A processing fee may be added to the deposit 24 subscription.
 - (1) The processing fee shall not exceed one 1 percent of the amount of the average entrance fee or five hundred dollars (\$500), whichever is greater.
 - (2) A nonrefundable processing fee may be paid directly to the applicant without being placed in the deposit escrow account.
- (c) Payments made to the applicant from by a 32 subscriber depositor for upgrades or modifications to the living unit shall not be placed in escrow with deposit 34 subscriptions. Written The applicant shall 35 written refund policies shall be given to the subscriber 36 depositor before accepting any payments for modifications or upgrades.
- 38 (d) The applicant shall furnish to the department 39 within the first 10 days of each calendar month a list of all 40 residents who have made payments for modifications or

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1 upgrades, the amounts each resident has paid, the dates of each payment, and the unit to be modified or upgraded 3 for each resident.

- (e) All payments for modifications or upgrades shall be 5 refunded to the depositor with interest if the applicant does not receive a certificate of authority for the proposed continuing care retirement community or expansion.
- (f) The department may record a lien against the continuing care retirement community property, or any 10 portion of the continuing care retirement community 11 property, to secure the applicant's obligations to refund 12 the depositor's payments made for modifications or upgrades. Any lien created under this section shall be to protect depositors governed by Section 1793.15.
- SEC. 33. Section 1780.4 of the Health and Safety Code 16 is amended to read:
- 1780.4. (a) All deposit subscription agreements 18 entered into between the applicant and the subscriber depositor shall be in writing and shall contain all information required by this section.
 - (b) All deposit subscription agreement forms shall be approved by the department prior to their use.
- (c) The requirements of this chapter and Chapter 3.2 24 (commencing with Section 1569) shall be the bases for approval of the forms by the department.
 - (d) All text in deposit subscription agreement forms shall be printed in at least 10-point typeface.
 - (e) The deposit subscription agreement form provide for all of the following:
- estimated for (1) An date commencement 31 construction of the proposed continuing care retirement community or, if applicable, each phase, if applicable, not to exceed 36 months from the date the permit to sell deposit subscriptions accept deposits is issued.
- (2) Identification—A statement to the effect that the 36 applicant will notify depositors of any material change in the application.
- (3) The identity of the specific unit subscribed to 38 reserved and the total deposit subscription for that unit. 39

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- (4) Processing fee terms and conditions, including:
- (A) The amount.

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- statement explaining the applicant's policy (B) A regarding refund or retention of the processing fee in the event of death of the subscriber depositor or voluntary 6 cancellation by the subscriber depositor.
- (C) Notice that the processing fee shall be refunded within 30 days, in the event that if the applicant does not accept the subscriber is not accepted depositor for 10 residency, or if the applicant fails to construct the continuing care retirement community is not constructed by before the estimated date of completion 12 the department determines that there 14 satisfactory cause for the delay.

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- (5) Requirements for of the deposit payment subscription by the subscriber depositor.
 - (5) Refund of the deposit subscription
- (6) A statement informing the depositor that their deposit payments will be converted to an entrance fee payment at the time the continuing care contract is executed.
- (7) A statement informing the depositor that deposits 24 will be refunded within 30 calendar days of notice the depositor's nonacceptance for residency or notice to the applicant of the death of the subscriber or his or her nonacceptance for residency depositor.

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- (8) A statement informing the depositor that 30 deposits will be refunded to the depositors if care retirement community constructed by the estimated date of completion and the department determines that there is no satisfactory cause 34 for the delay.
- 35 (9) Refund—A statement informing the depositor that 36 a refund of the deposit subscription within 10 calendar days of notice of voluntary cancellation by the subscriber 38 depositor. A statement The deposit agreement shall state that once construction begins and depositors who have deposited more than one thousand dollars (\$1,000) or 5

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1 percent of the entrance fee, whichever is greater, and 2 who have been notified that construction of the proposed 3 continuing care retirement community has commenced, 4 will not be entitled to a refund of their deposit until the 5 continuing care retirement community is in operation 6 provisional certificate of authority is issued or, refunds 7 shall be made only after another subscriber one of the 8 *following occurs:*

- (A) Another depositor has reserved the canceling 10 depositor's specific residential unit and paid necessary depositor subscription, or the subscriber deposit.
- (B) The depositor no longer meets financial or health 14 requirements for admission, whichever occurs first.
- (C) The applicant fails to meet the requirements of 16 Section 1786 or 1786.2.

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subscribers (10) A statement to depositors 19 specifies when funds may be released from escrow to the applicant and explains that thereafter subscriber the depositor's funds will not have escrow protection.

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- (11) A statement regarding advising the depositor 24 whether interest will be paid to the subscriber depositor on deposit subscription funds deposits placed in an the deposit escrow account.
- (f) If cash equivalents are to be accepted in lieu of 28 cash, all of the following shall also be included in the deposit agreement:
 - (1) A statement that cash equivalents that may be accepted as deposits shall be either certificates of deposit or United States securities with maturities of five years or less.
- 34 (2) A statement that the instruments will be held by 35 the escrow agent in the form in which they were 36 delivered and assigned by the depositor until they are replaced by cash or converted to cash. 37
- (3) A statement that the depositor will be required to 38 assign the instruments to a neutral third-party escrow 40 agent. If the bank or entity that issued the instruments

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1 refuses to allow this assignment, the escrow agent shall 2 not accept the instruments. These instruments shall be 3 reassigned to the depositor if the depositor terminates the 4 deposit agreement before the instruments mature. If the 5 depositor terminates the deposit agreement after the 6 instruments mature, the depositor shall receive a cash refund of the portion of the deposit represented by the matured instruments.

- (4) A statement that any amount by which the face 10 value of the deposited instruments exceeds the required deposit will be deemed part of the deposit and will be applied against the depositor's obligations under the deposit agreement.
- (5) A statement that the instruments shall be 15 converted to, or replaced with, cash prior to 16 department's authorization for the release of deposits to 17 the applicant. The depositor shall be advised that if the 18 depositor does not substitute cash in the amount equal to 19 the deposit, the applicant may do either of the following:
- (A) Direct the escrow agent to sell, redeem, or 21 otherwise convert the instruments to cash and to treat the 22 proceeds in the same manner as it treats cash deposits 23 under the deposit agreement. The costs of any such sale, 24 redemption, or conversion, including, without limitation, 25 transaction fees and any early withdrawal penalties, may 26 be charged to the depositor and paid out of the cash or 27 other instruments received from the depositor in escrow. 28 If there is a shortfall, the depositor may be immediately 29 obligated to pay the shortfall by check jointly payable to 30 the applicant and the escrow agent.
- (B) Terminate the deposit agreement. In this event, 32 the escrow agent shall reassign the property to the depositor and refund all cash in escrow within the time periods specified in the deposit agreement. 34
- (g) A statement that deposits will be invested in 36 instruments guaranteed by the federal government or an agency of the federal government, or in investment funds secured by federally guaranteed instruments.
- (h) A statement that no funds deposited in a deposit 39 escrow account will be subject to any liens, judgments,

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garnishments, or creditor's claims against the applicant, 2 the proposed continuing care retirement community 3 property, or the continuing care retirement community. 4 The deposit agreement shall also provide that deposits 5 may not be subject to any liens or charges by the escrow 6 agent, except that cash equivalent deposits may be subject to transactions fees, commissions, prepayment 8 penalties, and other fees incurred in connection with 9 these deposits.

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- (i) A schedule of projected monthly 11 estimated to be charged to residents for each of the first 12 five years of the facility's continuing care retirement 13 community's existence shall be attached to each deposit 14 subscription agreement. The This schedule shall contain a conspicuous statement in at least 10-point boldface type 16 that the projected fees are an estimate only and may be changed without notice.
- SEC. 34. Section 1781 of the Health and Safety Code 18 19 is amended to read:
- 1781. (a) All deposit subscriptions deposits, 21 excluding processing fees, shall be placed in an escrow account, the terms of which must account. All terms governing the deposit escrow account shall be approved in advance by the department.
- (b) The deposit escrow account shall be established by an escrow agent and the deposit subscription all deposits shall be deposited in a depository located in California approved by the department-and located in California and. The funds deposited therein shall The department's 30 approval of the depository shall be based, in part, upon its 31 ability to ensure the safety of funds and properties 32 entrusted to it and its qualifications to perform the 33 obligations of the depository pursuant to the deposit 34 escrow account agreement and this chapter. 35 depository may be the same entity as the escrow agent. 36 All deposits shall be kept and maintained in an account separate and apart from the applicant's business accounts 38 a segregated account without any commingling with other funds, including any funds or accounts owned by the applicant.

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(c) The escrow agent may be the same entity as the depository. If the escrow agent is a title company, it shall meet the following requirements:

- (1) A Standard and Poors rating of "A" or better or a comparable rating from a comparable rating service.
- (2) Licensure in good standing with the Department of Insurance.
- (3) Tangible net equity as required by Department of Insurance.
- (4) Reserves as required bv the Department of Insurance.
- (d) Funds All deposits shall remain in escrow until the 13 department has authorized their release in accordance 14 with of the deposits, as provided in Section 1783.2.
- (e) Deposit subscriptions Deposits shall be invested in 16 instruments guaranteed by, or agencies of, the federal government or by an agency of the federal government, 18 or in investment funds secured by federally guaranteed 19 instruments.
- (f) No funds deposited in an a deposit escrow account 21 shall be subject to any liens, judgments, garnishments, or 22 creditor's claims against the applicant or the continuing 23 care retirement community. Neither shall these funds 24 The deposit agreement shall also provide that deposits 25 may not be subject to any liens or charges by the escrow agent, except that cash equivalent deposits may be subject to transaction fees, commissions, prepayment penalties, and other fees incurred in connection with the 29 payment of cash equivalent deposit subscriptions those 30 deposits.
- 31 SEC. 35. Section 1781.2 of the Health and Safety Code 32 is amended to read:
- 33 1781.2. (a) Payments pursuant to deposit 34 subscriptions shall be deposited with All deposits shall be 35 delivered to the escrow agent and deposited into the 36 deposit escrow account within five business days after 37 their receipt from subscribers and shall by the applicant.
- 38 The deposit escrow account shall be accounted for in a
- separate escrow account.

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- (b) Deposits shall be accompanied by The applicant shall provide will all deposits delivered to the escrow holder a copy of the executed deposit—subscription agreement, a copy of the receipt given to the subscriber depositor, a summary of all deposits made on that date, and any requirement—of other materials required by the escrow holder.
- SEC. 36. Section 1781.4 of the Health and Safety Code is amended to read:
- 1781.4. The escrow deposit escrow account agreement between the applicant and the escrow agent shall provide include provisions for all of the following:
 - (a) The amount of the processing fee.

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- (b) Deposit of funds in A provision requiring that all deposits shall be placed into the deposit escrow account upon delivery.
- 17 (c) Monthly—A provision requiring that monthly
 18 progress reports, beginning the month after the escrow
 19 account is opened and ending after funds are released
 20 from escrow, to be sent by the escrow agent directly to
 21 the department, beginning the month after the deposit
 22 escrow account is opened and continuing through the
 23 month funds are released from escrow. These reports
 24 shall be prepared every month that there are any funds
 25 in the account and shall show each of the following in
 26 separate columns:
- 27 (1) The name and address of each subscriber depositor 28 or resident.
 - (2) The designation of the living unit being provided.
 - (3) Any processing fee which is deposited into escrow.
- 31 (4) The total deposit subscription required for the 32 unit.
 - (5) The total entrance fee for the unit.
 - (6) Twenty percent of the total entrance fee.
- 35 (7) Each *deposit* payment made towards the deposit 36 or refund given by or on behalf of the depositor and any 37 refunds paid to the depositor.
- 38 (8) The unpaid balance of for each deposit 39 subscription depositor's deposit.

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(9) The unpaid balance of for each depositor's 2 entrance fee.

- (10) The current balance in the deposit escrow account for each depositor and the collective balance.
- (11) The dollar amount, type, and maturity date of any cash equivalent paid by each depositor.
- (d) Investment A provision for investment of escrow account funds in a manner consistent with Section 1781.
- (e) A provision for refunds to depositors in the manner specified by Section 1783.2.
- (f) A provision regarding the payment of interest earned on the funds held in escrow in the manner specified in the applicant's deposit agreement.
- (g) Release of deposit escrow account funds as in the 15 manner specified in Section 1783.2 1783.3, including to 16 whom payment of interest earned on such funds will be made.
 - (f) The escrow agreement shall state that
- (h) Representations by the escrow agent for the 20 proposed continuing care retirement community shall 21 neither be a lender nor have fiduciary responsibilities to 22 lenders or bondholders that it is not, and shall not be 23 during the term of the deposit escrow account, a lender 24 to the applicant or for the proposed continuing care 25 retirement community, or a fiduciary for any lender or continuing 26 bondholder for that care retirement community, unless approved by the department.
- (i) If cash equivalents may be accepted as a deposit in 29 lieu of cash, the deposit escrow account agreement shall also include all of the following:
- (1) Authorization for the escrow agent to convert 32 instruments to cash when they mature. The escrow agent may notify all financial institutions whose securities are 34 held by the escrow agent that all interest and other 35 payments due upon these instruments shall be paid to the 36 escrow agent. The escrow agent shall collect, hold, invest, and disburse these funds as provided under the escrow agreement.
- (2) Authorization for the escrow agent to deliver the 39 40 instruments in its possession and release funds from

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according to written directions from the 1 escrow applicant, consistent with the terms provided in the deposit escrow account agreement. applicant's 4 escrow agent shall distribute cash and other property to 5 an individual depositor only upon either the subscriber's 6 written request to receive monthly payments of interest accrued on his or her deposits, or receipt of notice from the applicant to pay a refund to the depositor.

(3) A provision that the escrow agent shall maintain, 10 at all times, adequate records showing the beneficial ownership of the instruments.

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- (4) A provision that the escrow agency shall have no 13 responsibility or authority to initiate any transfer of the 14 instruments or conduct any other transaction without specific written instructions from the applicant.
- (5) A provision authorizing, instructing, and directing 17 the escrow to do all of the following:
- (A) Redeem and roll over matured investments into 19 money market accounts or other department approved 20 instruments with the escrow agent or an outside financial institution.
- (B) Collect and receive interest, principal, and other 23 things of value in connection with the instruments.
- (C) Sign for the depositors any declarations, affidavits, 25 certificates, and other documents that may be required to collect or receive payments or distributions with respect to the instruments.
- SEC. 37. Section 1781.6 of the Health and Safety Code 29 is amended to read:
- 1781.6. Changes to deposit subscription All changes to deposit agreement or deposit escrow agreement forms form shall require prior approval by the 32 department be submitted to, and approved by, the 34 department before use by the applicant.
- SEC. 38. Section 1781.8 of the Health and Safety Code 35 36 *is amended to read:*
- 1781.8. (a) As instructed by the applicant, funds 37 38 placed Deposits held in escrow accounts may be shall be placed in an interest bearing account or invested as provided under subdivision (d) (e) of Section 1781.

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(b) Earnings shall—Interest, income, and other gains derived from deposits held in a deposit escrow account may not be released or distributed from the deposit escrow account except upon written approval of the 5 department.

- (c) Approval by the department of for the release of 7 earnings generated from funds held in escrow shall be based upon an assessment that funds remaining in the deposit escrow account will be sufficient to pay refunds 10 and any interest promised, if any, to all subscribers, and all depositors, as well as administrative costs owed to the 12 escrow agent administrative costs.
- (d) Interest When released by the department, 14 interest earned by the funds in the deposit escrow 15 account shall be distributed in accordance with the terms 16 of the deposit subscription agreement.
- SEC. 39. Section 1781.10 of the Health and Safety 18 *Code is amended to read:*
- 1781.10. No monevs deposit or anv other 20 consideration, while asset held in a deposit escrow account, shall be encumbered or used as collateral for any 22 obligation of the applicant or any other person, unless the 23 applicant obtains prior written approval from the 24 department for the encumbrance or use as collateral. The 25 department shall not approve any encumbrance or use as 26 collateral under this section unless the encumbrance or 27 use as collateral is subordinate expressly subordinated to 28 the rights of transferors for refunds depositors under this chapter to refunds of their deposits.
- SEC. 40. Section 1782 of the Health and Safety Code 30 31 is amended to read:
- 1782. (a) An applicant shall not begin construction on any phase of a continuing care retirement community 34 without the first obtaining a written acknowledgment of 35 *from* the department that all of the following 36 prerequisites have been met:
- (1) A completed application has been submitted to the 37 38 department.
- (2) A permit to sell deposit subscriptions accept 39 deposits has been issued to the applicant or, in the case of

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retirement continuing care community renovation projects, the department has issued a written approval of the applicant's application.

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- (3) At—For continuing new care retirement 5 communities, or construction projects adding new units to an existing continuing care retirement community, deposits equal to at least 20 percent of each depositor's applicable entrance fee has have been received placed into escrow for each phase for at least 50 percent of the number of residential living units to be constructed.
 - (A) Paragraph (3) shall apply to all applications that are submitted after May 31, 1995.
- (B) For applications, and for those phases of the 14 project that were identified as part of applications, submitted on or before May 31, 1995, at least 20 percent 16 of each applicable entrance fee shall be received for at least 60 percent of residential units projected to be occupied six months after the continuing care retirement community is opened for operation.
 - (b) Applicants shall notify subscribers depositors in writing of the commencement of construction when construction is commenced.
 - (c) For purposes of this chapter only, construction shall not include site preparation—or, demolition, or the construction of model units.
 - SEC. 41. Section 1783 of the Health and Safety Code is amended to read:
- 1783. (a) No building, which has been constructed by the applicant or related parties without prior written approval of the department for commencement of construction, shall be permitted to be converted to a continuing care retirement community until five years have elapsed from the completion of construction. This 34 section shall not apply to expansions of existing continuing care retirement communities.
 - (b) If—(1) An applicant proposing to convert existing buildings are to be converted to a building to continuing care use, the applicant shall comply with all the application requirements in Section 1779.4 identified by the department as necessary for the department to

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assess the feasibility of the proposed continuing care retirement community as determined by the department pursuant to Section 1779.4; provided, however, that the department may waive or modify the presales 5 requirements of subparagraphs (A) and (B) of paragraph 6 (1) of subdivision (a) of Section 1783.2 and paragraph (2) of subdivision (a) of Section 1786 if the facility is already occupied. This section shall not apply to expansions of existing continuing care retirement communities 9 conversion. 10

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- (2) If proposed continuing retirement the care community is already occupied and only a portion of the existing residential units will beconverted continuing care units, the department may modify the 16 presale requirements of paragraph (3) of subdivision (a) of Section 1782 and paragraph (2) of subdivision (a) of Section 1783.3.
- (b) Any entity applying for conversion to a applicant 20 proposing to convert an existing building into continuing 21 care retirement community, unless qualified for a waiver 22 or modification pursuant to subdivision (b), units shall 23 indicate the portion of the facility to be used for care contracts continuing contract services. 25 continuing care allocation specified by the applicant shall 26 be reflected in all financial and marketing studies and shall be used to determine the percentages in meeting applicant's compliance with the percentage requirements of the deposit subscription period pursuant 30 to subdivision (b) of Section 1783.2 and Section 1786 stated in paragraph (3) of subdivision (a) of Section 1782 and paragraph (2) of subdivision (a) of Section 1783.3.
- 33 SEC. 42. Section 1783.2 of the Health and Safety Code 34 is amended to read:
- 35 1783.2. (a) Refunds to subscribers shall be disbursed 36 as follows:
- (1) Except as provided in paragraph (2), the An 38 escrow agent shall pay refunds refund to subscribers who eancel a deposit subscription agreement, upon written notice to the escrow agent from the applicant, in

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accordance with the depositor all amounts required by the approved depositor's deposit—subscription agreement upon receiving written notice from the applicant that a depositor has canceled the deposit agreement. These refunds shall Refunds required by this subdivision shall be paid to the depositor within 10 days after the subscriber depositor gives notice of cancellation to the applicant.

(2) After notice to subscribers of commencement of construction, a subscriber

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- (b) Depositors who have deposited more than one thousand dollars (\$1,000) or 5 percent of the entrance fee, whichever is greater, and who have been notified that construction of the proposed continuing care retirement 14 community has commenced, shall not be entitled to a 15 refund of their deposit-subscriptions until the any of the 16 *following occurs:*
 - (1) The continuing retirement care community opened for operation, another subscriber operation.
 - (2) Another depositor has reserved canceling depositor's specific residential unit and paid necessary deposit subscription, or the subscriber deposit.
 - (3) The depositor no longer meets financial or health requirements for admission, whichever occurs first.
 - (b) Releases to applicants shall be as follows:
 - (1) The applicant shall petition in writing to the department for the release of escrow, attesting to all of the following:
 - (A) The construction of the continuing care retirement community is at least 50 percent completed.
 - (B) At least 20 percent of the total of each applicable entrance fee has been received and placed in escrow for at least 60 percent of the total number of residential living units. Any units for which a refund is pending cannot be counted towards that 60 percent requirement.
- (C) All cash equivalent deposit subscriptions have 36 been liquidated.
 - (D) The applicant's average performance over any six-month period substantially equals or exceeds its financial and marketing projections approved by the department, for that period.

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(E) The applicant has received a commitment for any permanent mortgage loan or other long-term financing.

- (2) The department shall instruct the escrow agent to release to the applicant all deposit subscriptions which have been placed in escrow pursuant to Section 1781 when all of the following requirements have been met:
- (A) The department has confirmed the information provided by the applicant pursuant to paragraph (1) of subdivision (b).
- (B) The department, in consultation with the Continuing Care Contracts Committee, has determined that there has been substantial compliance with projected annual financial statements, which served as a basis for issuance of the permit to sell deposit subscriptions.
- (C) The applicant has complied with all applicable licensing requirements in a timely manner.
- (D) The applicant has obtained a commitment for any permanent mortgage loan or other long-term financing that is satisfactory to the department.
- (E) The applicant has complied with any additional reasonable requirements for release of funds placed in escrow accounts, established by the department pursuant to Section 1785.
- SEC. 43. Section 1783.3 is added to the Health and Safety Code, to read:
- 1783.3. (a) In order to seek a release of escrowed funds, the applicant shall petition in writing to the department and certify to each of the following:
- (1) The construction of the proposed continuing care retirement community or phase is at least 50 percent completed.
- (2) At least 20 percent of the total of each applicable 34 entrance fee has been received and placed in escrow for at least 60 percent of the total number of residential living 36 units. Any unit for which a refund is pending may not be counted toward that 60 percent requirement.
- (3) Deposits made with cash equivalents have been 38 39 either converted into, or substituted with, cash or held for 40 transfer to the provider. A cash equivalent deposit may

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be held for transfer to the provider, if all of the following conditions exist:

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- (A) Conversion of the cash equivalent instrument would result in a penalty or other substantial detriment to the depositor.
- (B) The provider and the depositor have a written agreement stating that the cash equivalent will be transferred to the provider, without conversion into cash, when the deposit escrow is released to the provider under 10 this subdivision (a).
 - (C) The depositor is credited the amount of the cash equivalent.
- (4) The applicant's average performance over 14 six-month period substantially equals or exceeds its 15 financial and marketing projections approved by 16 *department, for that period.*
- (5) The applicant has received a commitment for any 18 permanent mortgage loan or other long-term financing.
 - (b) The department shall instruct the escrow agent to release to the applicant all deposits in the deposit escrow account when all of the following requirements have been met:
- (1) The department has confirmed the information 24 provided by the applicant pursuant to subdivision (a).
- department, consultation (2) *The* inwith the 26 Continuing Care Advisory Committee, has determined compliance been substantial there has projected annual financial statements that served as a basis for issuance of the permit to accept deposits.
 - (3) The applicant has complied with all applicable licensing requirements in a timely manner.
- (4) The applicant has obtained a commitment for any permanent mortgage loan or other long-term financing 34 that is satisfactory to the department.
- 35 (5) The applicant has complied with any additional 36 reasonable requirements for release of funds placed in escrow accounts, established by 37 the deposit department under Section 1785.

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(c) The escrow agent shall release the funds held in 2 escrow to the applicant only when the department has instructed it to do so in writing.

(d) When an application describes different phases of 5 construction that will be completed and commence operating at different times, the department may apply the 50 percent construction completion requirement to any one or group of phases requested by the applicant, provided the phase or group of phases is shown in the 10 applicant's projections to be economically viable.

SEC. 44. Section 1784 of the Health and Safety Code 12 is amended to read:

1784. (a) If construction of the proposed continuing 14 care retirement community, or applicable phase, has not commenced within 36 months from the date the permit 16 to sell deposit subscriptions accept deposits is issued, an applicant may request an extension of the permit to sell deposit subscriptions accept deposits. The request for extension shall be made to the department in writing and include the reasons why construction of the proposed continuing care retirement community was not commenced within the required 36-month time period, and period. The request for extension shall also state the 24 new estimated date for commencement of construction.

- (b) In response to a request for an extension, the 26 department may do one of the following:
- (1) If the department determines there is satisfactory 28 cause for the delay in commencement of construction of the proposed continuing care retirement community or applicable phase, the department may extend the permit to sell deposit subscriptions for a one-year period accept deposits for up to one year.
- (2) If the department determines that there is no 34 satisfactory cause for the delay, the department may 35 instruct the escrow agent to refund to subscribers 36 depositors all deposit subscriptions deposits held in escrow, plus any interest due under the terms of the deposit subscription agreements, and require the applicant to file a new application and application fee.

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The applicant shall also refund all processing fees paid by 2 the depositors.

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- (c) Within 10 calendar days the applicant shall notify each subscriber depositor of the department's approval or denial of the extension, of any expiration of the permit to sell deposit subscriptions, accept deposits and of any right to a refund of their deposit subscription deposits.
- SEC. 45. Section 1785 of the Health and Safety Code is amended to read:
- 1785. (a) If, at any time prior to issuance of a certificate of authority, the applicant's performance any six-month period over does not substantially equal or exceed the applicant's projections 14 for that period, the department, after consultation and upon consideration of the recommendations of the 16 Continuing Care Contracts Advisory Committee, may take any of the following actions:
- (1) Cancel the permit to sell deposit subscriptions accept deposits and require that all funds in escrow be 19 returned to depositors immediately.
 - (2) Increase the required percentages of construction completed, units reserved, or entrance fees to deposited as required under Sections 1782, 1783.2 1783.3, 1786, and 1786.2.
 - (3) Increase the reserve requirements under this chapter.
- (b) Prior to taking any actions specified in subdivision 28 (a), department shall give the applicant opportunity to submit a feasibility study from a consultant in the area of continuing care, approved department, to determine whether in his or her opinion the proposed continuing care retirement community is still viable, and if so, to submit a plan of correction. The 34 department, in consultation with the committee, shall determine if the plan is acceptable.
- (c) In making its determination, the department shall 36 take into consideration the overall performance of the 37 proposed continuing care retirement community to date. 38
- 39 (d) If deposit subscriptions deposits have been released from escrow, the department may further

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require the applicant to reopen the escrow as a condition of receiving any further entrance fee payments from subscribers depositors or residents.

- (e) The department may require the applicant to 5 notify all depositors and, if applicable, all residents, of any actions required by the department under this section.
 - SEC. 47. Section 1786 of the Health and Safety Code is amended to read:
- 1786. (a) In order to permit an applicant to become 10 a provider and enter into continuing care contracts, the The department shall issue a provisional certificate of authority when a provider an applicant has done all of the following:
 - (1) Complied with the approved marketing plans.
- (2) Met and continues to meet the requirements 16 imposed under subdivision—(b) (a) of Section 1783.2 1783.3. The issuance of the provisional certificate of 18 authority does shall not result in the automatic require, and shall not be dependent upon the release of escrowed 20 funds pursuant to. Release of escrowed funds shall be governed by Section 1783.2 1783.3.
- (3) Completed construction of the continuing 23 retirement community or applicable phase.
 - (4) Obtained the required licenses.
 - (5) Paid the remainder of the application fees fee.
- (6) Executed a permanent mortgage loan or other 27 long-term financing.
- (7) Provided the department with a recorded copy of 29 the Notice of Statutory Limitation on Transfer required by subdivision (aa) of Section 1779.4.
 - (8) Met all applicable provisions of this chapter.
- (b) The provisional certificate of authority shall expire 12 months after issuance unless both of the following 34 occur:
- 35 (1) Sixty No later than 60 days prior to the expiration 36 of the provisional certificate of authority, the provider petitions the department and demonstrates good cause 38 in writing for an extension of the provisional certificate of authority.

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(2) Upon a showing of good cause by the provider, the The department determines that the applicant provider is capable of meeting the requirements of Section 1786.2 during the period of extension period.

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- (c) The length of the period of extension shall be determined at the department's department exercise its discretion to determine the length of the extension period.
- (d) After the provisional certificate of authority is 10 issued providers may continue to take deposits modifying the deposit subscription agreement appropriate. The new deposit agreement shall clearly state the rights of the depositor and the provider. These 14 The applicant shall submit the agreements shall be submitted to the department for review and approval 16 prior to use. A provider that holds a provisional certificate of authority or certificate of authority may accept fees 18 paid by potential residents to be placed on a waiting list 19 without using a deposit agreement. These waiting list fees 20 may not exceed five hundred dollars (\$500), and shall be refunded to the potential resident upon written request.
 - (e) All holders of a provisional certificate of authority shall request in writing a final certificate of authority when the requirements of Section 1786.2 have been met.
 - SEC. 48. Section 1786.2 of the Health and Safety Code is amended to read:
 - 1786.2. (a) A certificate of authority—The department shall not be issued to issue a certificate of authority to an applicant or a provider, unless until the department determines that all each of the following have has occurred:
- (1) A provisional certificate of authority has been 33 issued or all of the requirements for a provisional 34 certificate of authority have been satisfied. In the case of 35 an application for a new certificate of authority due to an 36 organizational change, if the continuing care retirement community is financially sound and operating 38 compliance with this chapter, it shall be sufficient for the purposes of this paragraph that the department has 40 approved the application in writing.

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- (2) One of the following requirements has been met:
- (A) At a minimum, continuing care contracts have been executed for 80 percent of the total residential living units in the continuing care retirement community, with payment in full of the entrance fee.
- (B) At a minimum, continuing care contracts have been executed for 70 percent of the total residential living units in the continuing care retirement community, with payment in full of the entrance fee, and the provider has 10 submitted a an updated financial and marketing plan, satisfactory to the department, demonstrating that the 12 proposed continuing care retirement community will be 13 financially viable.
- (C) At a minimum, continuing care contracts have 15 been executed for 50 percent of the total residential living 16 units in the continuing care retirement community, with 17 payment in full of the entrance fee, and the provider 18 furnishes and maintains a letter of credit or other security, 19 satisfactory to the department, sufficient to bring the 20 total amount of payments to a level equivalent to 80 21 percent of the total entrance fees for the entire 22 continuing care retirement community.
- (3) A minimum five-year financial plan of operation 24 remains satisfactory to the department.
- (4) Adequate reserves exist as required by Sections 26 1792.2 and 1793. For a new continuing care retirement community without an operating history, the department 28 may approve calculation of required reserves on a pro in conjunction with compliance forma basis approved marketing plans.
- (5) All applicable provisions of this chapter have been 32 met.
- (b) When issued, the certificate of authority, whether 34 full or conditioned, shall remain in full force unless 35 forfeited by operation of law under Section 1793.7, 36 inactivated under Section 1793.8, or suspended, or 37 revoked by the department pursuant to Section 1793.21.
- 38 (c) The provider shall display the certificate of authority shall be displayed in a prominent place within the continuing care retirement community.

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1 SEC. 49. Section 1787 of the Health and Safety Code is amended to read:

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- 1787. (a) All continuing care contracts entered into between the provider and the transferor shall be in writing and shall contain all the information required by Section 1788.
- (b) All continuing care contract forms, including all addenda, exhibits, or and any other related documents, and any revisions thereto, shall incorporated therein, as 10 well as any modification to these items, shall be approved by the department prior to their use.
- (c) The department shall approve continuing 13 contract forms that comply with this chapter. The chapter 14 requirements of this and Chapter 3.2 15 (commencing with Section 1569) shall be the bases for 16 approval by the department. To the extent that this chapter conflicts with Chapter 3.2 (commencing with 18 Section 1569), this chapter shall prevail.
- (d) The A continuing care contract approved by the 20 department shall constitute the full and complete agreement between the parties.
- (e) More than one continuing care contract form may 23 be used by a provider if multiple program options are available.
 - (f) All text in continuing care contract forms shall be printed in at least 10-point typeface.
- (g) A clearly legible copy of the continuing care 28 contract, executed by the each provider and a transferor, shall named on the provisional certificate of authority or certificate of authority, the resident, and any transferor, shall be furnished, with all required or 32 included attachments to the transferor resident at the time the continuing care contract is executed and shall. 34 A copy shall also be furnished within 10 calendar days to the resident if the resident is other than the transferor any 36 transferor who is not a resident.
- (h) The 37 provider shall require written 38 acknowledgment from the transferor resident (and the resident, if other than the transferor any transferor who

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is not a resident) that the executed copy of the continuing care contract and attachments have been received.

- (i) The continuing care contract shall constitute be an admissions agreement for purposes of the residential care 5 facility for the elderly and long-term health care facility requirements and shall state the resident's entitlement to receive these levels of care. The continuing care contract may state the entitlement for skilled nursing care in 9 accordance with the provisions of law governing admissions to long-term health care facilities in effect at 10 the time of admission to the skilled nursing facility. The parties may agree to the terms of nursing facility 12 admission at the time the continuing care contract is 13 14 executed, or the provider may present an exemplar of the 15 then-current nursing facility admission agreement and 16 require the resident to execute the form of agreement in effect at the time of admission to the nursing facility. 17 18 These The terms shall include the nursing fee, or the 19 method of determining the fee, at the time of the 20 execution of the continuing care agreement contract, the services included in and excluded from the fee, the grounds for transfers and discharges, and any other terms 23 required to be included under federal applicable law.
- (i) Only the skilled nursing admission agreement 25 sections of continuing care contracts which cover long-term health care facility services shall be are subject to Chapter 3.95 (commencing with Section 1599.60). The provider-must shall submit the proposed skilled nursing admission agreement to the State Department of Health 30 Services for its review and to the State Department of 31 Social Services for review to determine that it is not in and approval under that department's rules and regulations. The skilled nursing admission agreement submitted to 34 the department shall be reviewed for any violation of the laws relating to continuing care contracts.
- 35 SEC. 50. Section 1788 of the Health and Safety Code 36 37 is amended to read:
- 38 1788. (a) Any continuing care contract contracts shall contain all of the following: 39
 - (1) The legal name and address of the each provider.

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(2) The name and address of the continuing care retirement community.

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- (3) The resident's name and number the identity of the unit to be occupied the resident will occupy.
- (4) If the there is a transferor is someone other than 6 the resident, the transferor shall be a party to the contract and the transferor's name and address shall be separately designated specified.
- (5) If the provider has used the name of any charitable 10 or religious or nonprofit organization in its title before January 1, 1979, and continues to use that name, and that organization is not responsible for the financial and contractual obligations of the provider or the obligations 14 specified in the continuing care contract, the provider shall include in every continuing care contract a 16 conspicuous statement which clearly informs transferor resident that the organization is not financially responsible.
- (6) The date the continuing care contract is signed by 20 the resident and, where applicable, any other transferor.
 - (7) The duration of the continuing care contract.
- (8) A list of the following services that are to will be 23 made available to the resident, which shall as required to 24 provide the appropriate level of care. The list of services 25 shall include at a minimum, the following conditions for services required as a condition for licensure as a residential care facility for the elderly licensure. including, but not limited to, all of the following:
- (A) Regular observation of the resident's health status to ensure that his or her dietary needs, social needs, and 30 31 needs for special services are satisfied.
 - (B) Safe and healthful living accommodations. including housekeeping services and utilities.
- 34 (C) Maintenance of house rules for the protection of residents. 35
- planned activities program, 36 (D) A which includes social and recreational activities 37 appropriate to the interests and capabilities of the resident.

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(E) Three balanced, nutritious meals and snacks made available daily, including special diets prescribed by a physician as a medical necessity.

- (F) Personal care Assisted living services.
- (G) Assistance with taking medications.
- (H) Central storing and distribution of medications.
- (I) Arrangements to meet health needs, including arranging transportation.
- (9) An itemization of the services that are included in 10 the monthly fee and the services that are available at an extra charge. The provider shall attach a current fee 12 schedule to the continuing care contract.
- (10) The procedures and conditions under which 14 residents may be voluntarily or and involuntarily 15 transferred from their designated living units. 16 transfer procedures, at a minimum, shall provide for 17 include provisions addressing all of the following 18 *circumstances under which transfer may be authorized*:
- (A) When, in the opinion of the continuing care 20 retirement community management, a physician—and surgeon, appropriate specialist, or licensing official in the 22 consultation with resident and appropriate 23 representative, if any, any of the following conditions 24 exists:
- (i) The resident is nonambulatory. The definition of 26 nonambulatory, "nonambulatory," as defined provided 27 in Section 13131, shall either be stated in full in the 28 continuing care contract or be cited, with. If Section 29 13131 is cited, a copy of it the statute shall be made 30 available to the resident, either as an attachment to the continuing care contract or by specifying that it will be 32 provided upon request. If the a nonambulatory resident 33 occupies a room that has a fire clearance 34 nonambulatory residence, provision for transfer-- under 35 the above circumstances is unnecessary shall not be 36 necessary.
- (ii) Resident The resident develops a physical 37 38 mental condition that endangers the health, safety, or well-being of the resident or another person, or causes an

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unreasonable and ongoing disturbance at the continuing care retirement community.

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- (iii) Transfer The resident's condition or needs 4 require the resident's transfer to the continuing care 5 retirement community's skilled nursing facility or 6 personal care an assisted living care unit is required or 7 skilled nursing facility for more efficient care and/or or 8 to protect the health of other residents, or because the 9 level of care needed cannot required by the resident 10 exceeds that which may be lawfully be provided in the living unit.
- (iv) Transfer—The resident's condition or needs 13 require the resident's transfer to a nursing home or 14 facility, hospital, or other facility is required, and the 15 provider has no facilities available for such to provide that 16 level of care.
- (B) Provision for transfer Transfer of a 18 resident when a shared accommodation arrangement is 19 terminated.
- (C) When transfer Transfer is requested or required, 21 by the provider or the resident, for any other reason.
- (11) Provisions for describing any change changes in 23 the resident's monthly rate fee and any refund of 24 entrance fees when a changes in the entrance fee refund 25 payable to the resident that will occur if the resident 26 transfers from any unit.
- (12) Any—The provider's continuing obligations of the 28 provider if any, in the event a resident is transferred from 29 the continuing care retirement community to another 30 facility.
- (13) Whether the provider has any responsibility—The 32 provider's obligations, if any, to resume care upon the 33 resident's return after a temporary transfer from the 34 continuing care retirement community.
- (14) The *provider's* obligations of the provider for 36 continued to provide services to the resident while the resident is absent from the continuing care retirement community.
- (15) The conditions under which the resident must permanently releases release his or her living unit.

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(16) If real or personal properties are transferred in lieu of cash, a statement as to their specifying each item's value at the time of transfer, and how the value was ascertained shall be included.

- itemized receipt which includes (A) An the above 6 information described acceptable, if is incorporated as a part of the continuing care contract.
- (B) With respect to the transfer of When property, is or will be transferred, the continuing care 10 contract shall include a statement that the deed or other 11 instrument of conveyance shall contain a recital specify 12 that the transaction real property is made conveyed 13 pursuant to a "continuing care contract" 14 contract and may be subject to rescission by the 15 transferor within 90 days from the date of the transfer that 16 the resident first occupies the residential unit.
- (C) The failure to comply with paragraph (16) shall 18 not affect the validity of title to real property transferred pursuant to this chapter.
 - (17) The amount of the entrance fee.
- (18) In the event two parties have jointly paid the 22 entrance fee or other payment which allows them to 23 occupy the unit, the continuing care contract shall define 24 the allocation of fees describe how any refund of entrance 25 fees is allocated.
 - (19) The amount of any processing fee.
 - (20) The amount of any monthly care fee.
- (21) For continuing care contracts which that require 29 a monthly care fee or other periodic rate payment, the continuing contract provide statements care shall concerning all of include the following:
 - (A) That A statement that the occupancy and use of the accommodations by the resident is contingent upon the regular payment of the fee.
- (B) The regular rate of payment agreed upon (per 35 36 day, week, or month).
- (C) Whether—A specifying 37 provision whether 38 payment will be made in advance or after services have been provided.

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(D) Whether any adjustment in the A provision specifying the provider will adjust monthly care fees is to be made by the provider for the resident's support, maintenance, board, or lodging, which is supplied to when a resident—who requires medical attention when he or she is absent while away from the continuing care retirement community.

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- (E) If any A provision specifying whether a credit or allowance is to will be given to a resident who is absent 10 from the continuing care retirement community or from meals, and if such. This provision shall also state, when applicable, that the credit is to may be permitted at the discretion or by special permission of the provider.
- (22) All continuing care contracts shall specify one of 15 the following basic methods for calculating changes in 16 that include monthly care fees shall address changes in monthly care fees by including either of the following provisions:
 - (A) For prepaid continuing care contracts, include monthly care fees, one of the following methods:
- (i) Fees shall not be subject to change during the 22 lifetime of the agreement.
- (ii) Fees shall not be increased by more than a 24 specified number of dollars in any one year and not more 25 than a specified number of dollars during the lifetime of the agreement.
 - (iii) Fees shall not be increased in excess of a specified percentage over the preceding year and not more than specified percentage during the lifetime of agreement.
- (B) For monthly fee continuing care contracts, except prepaid contracts, changes in monthly care fees shall be based on projected costs, prior year per capita costs, and 34 economic indicators.
- (23) The continuing care contract shall provide for 36 notification of A provision requiring that the provider give written notice to the resident at least 30 days in advance of any change in the resident's monthly care fees or in the price or scope or price of any component of care or other services.

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(24) The continuing care contract shall include a A provision indicating whether the resident's rights under the continuing care contract include any proprietary 4 interests in the assets of the provider or in the continuing 5 care retirement community, or both.

- (25) If there is a loan on the continuing care 7 retirement community property, the continuing care 8 contract shall advise residents that rights they is 9 encumbered by a security interest that is senior to any 10 claims the residents may have to enforce continuing care 11 contracts, a provision shall advise the residents that any 12 claims they may have under the continuing care contract are subordinate to the rights of the secured lender. For 14 equity projects, the continuing care contract shall specify 15 the type and extent of the equity interest and whether 16 any entity holds a superior security interest.
- (26) Notice that the living units are part of a 18 continuing care retirement community that is licensed as 19 a residential care facility for the elderly and, as such a 20 result, any duly authorized agent of the department may, 21 upon proper identification and upon stating the purpose 22 of his or her visit, enter and inspect the entire premises 23 at any time, without advance notice.
- (27) A conspicuous statement, in at least 10-point 25 boldface type in immediate proximity to the space 26 reserved for the signature signatures of the resident and, 27 if applicable, the transferor, that provides as follows: 28 "You, the resident or transferor, may cancel the 29 transaction without cause at any time within 90 days from 30 the date of this transaction you first occupy your living unit. See the attached notice of cancellation form for an explanation of this right."
- (28) Notice that during the cancellation period, the 34 continuing care contract may be canceled upon 30 days' written notice by the provider without cause, or that the 36 provider waives this right.
- (29) The terms and conditions under which the 38 continuing care contract may be terminated after the cancellation period by either party, including any health or financial conditions.

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(30) A statement that involuntary termination of, 2 after the cancellation period, a provider may unilaterally 3 terminate the continuing care contract by the provider after the cancellation period shall be only for only if the 5 provider has good and sufficient cause.

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- (A) Any continuing care contract containing a clause that provides for a resident to be evicted, or provides for a continuing care contract to be canceled terminated for "just cause," "good cause," or other similar provision, 10 shall also include a provision that none of the following activities by the resident, or on behalf of the resident, 12 constitutes "just cause," "good cause," or otherwise the eviction or cancellation activates termination 14 provision:
- (i) Filing or lodging a formal complaint with the 16 department or other appropriate authority.
- (ii) Participation in an organization or affiliation of 18 residents, or other similar lawful activity.
- (B) No The provision required by this paragraph shall 20 also state that the provider shall not discriminate or 21 retaliate in any manner against any resident of a continuing care retirement community for contacting 23 the department, or any other state, county, or city agency, or any elected or appointed government official 25 to file a complaint or for any other reason, or for participation in a residents' evalition organization or association.
- (C) Nothing in this provision shall diminish paragraph 29 diminishes the provider's ability to terminate 30 continuing care contract for good and sufficient cause.
- (31) A statement that at least 90 days' written notice 32 to the resident is required for an involuntary a unilateral termination of the continuing care contract by the 34 provider.
- 35 (32) A statement concerning the length of notice that 36 is required by a resident for the voluntary termination of 37 is required to give the provider to voluntarily terminate 38 the continuing care contract after the cancellation 39 period.

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(33) The policy or terms for refunding any portion of entrance fee. in the event of cancellation, termination, or death. If the continuing care contract includes any provision for a refund of all or a part of the 5 entrance fee, then it shall also specify the amount, if any, 6 the resident has paid or will pay for upgrades, special features or modifications to the resident's unit, and state 8 that, if the continuing care contract is cancelled or 9 terminated by the provider, the provider shall amortize 10 the specified amount at the same rate as the resident's entrance fee, and refund the unamortized balance to the resident at the same time the provider pays the resident's 12 13 entrance fee refund.

(34) The following notice at the bottom of the signatory page:

> "NOTICE" (date)

This is a continuing care contract as defined by 20 paragraph (8) of subdivision (c), or subdivision (l) of Section 1771(j) or 1771(w) of Chapter 10 of Division 2 1771 of the California Health and Safety Code. This 23 continuing care contract form has been approved by the 24 State Department of Social Services as required by 25 Section 1787(b) subdivision (b) of Section 1787 of the 26 California Health and Safety Code. The basis for this approval was a determination that (provider name) has complied with specific requirements of the statutes has submitted a contract that complies with the minimum statutory requirements applicable to continuing contracts. Thedepartment does not approve disapprove any of the financial or health care coverage provisions in this contract. Approval by the department 34 is neither NOT a guaranty of performance nor or an 35 endorsement of any continuing care contract provisions. 36 Prospective transferors and residents are strongly encouraged to carefully consider the benefits and risks of 38 this continuing care contract before signing. You should and to seek financial and legal advice as needed before

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signing.

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- (35) The provider may not attempt to absolve itself in the continuing care contract from liability for its negligence by any statement to that effect, and shall include the following statement in the contract: "Nothing this continuing care contract limits either provider's obligation to provide adequate care and supervision for the resident or any liability on the part of 10 the provider which may result from the provider's failure to provide this care and supervision."
- (b) A life care contract shall also include all of the 13 following provide that:
- (1) Provision to provide all All levels of care, including 15 acute care and physicians physicians and surgeons 16 services will be provided to a resident.
- (2) Provision to provide this care Care will be 18 provided for the duration of the resident's life except for termination of unless the life care contract is canceled or terminated by the provider during the cancellation period or after the cancellation period for good cause.
- (3) Provision to provide a A comprehensive 23 continuum of care will be provided to the resident, skilled nursing, in a facility under including ownership and supervision of the provider on, or adjacent to, the continuing care retirement community premises.
 - (4) Provision that no change will be made in the monthly Monthly care fees will not be changed based on the resident's level of care or service.
- (5) Provision to subsidize residents A resident who 31 become becomes financially unable to pay their his or her 32 monthly care fees shall be subsidized provided that the resident's financial need did does not arise from the action by the resident to divest themselves of their the resident of his or her assets.
- (c) The continuing Continuing care contract 37 contracts may include, but is not limited to, and need not include, any of the following items provisions:
- (1) Provision for To subsidize a resident who becomes 39 financially unable to pay for his or her monthly care fees

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at some future date to be subsidized. If provision a continuing care contract provides for subsidizing resident is included, the following provisions may be included it may also provide for any of the following:

- (A) A stipulation that the The resident shall apply for any public assistance or other aid for which he or she is eligible and that the provider may apply for assistance on behalf of the resident.
- (B) A stipulation that the provider shall—The 10 provider's decision shall be the final and conclusive determining body of regarding any adjustments to be made or any action to be taken regarding any charitable consideration to be extended to any of its residents.
- (C) Provision for the The provider is entitled to 15 payment or entitlement of for the actual costs of care 16 from out of any property acquired by the resident subsequent to the any adjustment, as provided in 18 subparagraph (B) extended the resident under to paragraph (1), or from any other property not disclosed 20 by of the resident at any time which the resident failed to disclose.
- (D) Provision that the The provider may pay the 23 monthly premium of the resident's health insurance coverage under medicare Medicare to ensure that such those payments will be made.
 - (E) Provision that the The provider may receive an assignment from the resident of the right to apply for and to receive such benefits, for and on behalf of the resident.
 - (F) Provision that the The provider is not responsible for the costs of furnishing the resident with any services, and medication, when reimbursement reasonably available from any governmental agency, or any private insurance.
- (G) Any refund due to the resident at the termination of the continuing care contract may be offset by any prior 36 subsidy to the resident by the provider.
- (2) Provisions which To limit responsibility for costs 38 associated with the treatment or medication of an ailment or illness existing prior to the date of admission. In such cases, the medical or surgical exceptions, as disclosed by

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the medical entrance examination, shall be listed in the continuing care contract or in the a medical report, which may be attached to and made a part of the continuing care contract.

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- (3) Legal remedies which may be applied in case available to the provider if the resident makes any material misrepresentation or omission pertaining to the resident's assets or health has been made by the resident.
- (4) A clause which restricts transfer or assignments of 10 the resident's rights and privileges under a continuing care contract because of due to the personal nature of the continuing care contract.
- (5) A clause for the protection of the provider in 14 instances where it may wish provider's ability to waive any a resident's breach of the terms or provisions of the 16 continuing care contract in specific instances where the resident has breached the continuing care contract 18 without relinquishment of relinquishing its right to insist upon full compliance by the resident with all of the other 20 terms or provisions in the contract.
- (6) Provision for the reimbursement of A provision 22 that the resident shall reimburse the provider for any 23 uninsured loss or damage to the resident's unit, beyond normal wear and tear suffered by the provider as the result of, resulting from the resident's carelessness or negligence on the part of the resident.
- (7) Provision—A provision that the resident agrees to 28 observe the off-limit areas of the continuing care retirement community as designated by the provider for safety reasons. However, the The provider shall may not attempt to absolve itself include any provision in the a continuing care contract that absolves the provider from liability for its negligence by any statement to that effect.
- (8) Provision A provision for the subrogation to the provider of the resident's rights in the case of injury to a 36 resident caused by the acts or omissions of a third party, or for the assignment of the resident's recovery or benefits in this case to the provider, to the extent of the value of the goods and services furnished by the provider to or on behalf of the resident as a result of the injury.

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(9) Provision A provision for a lien on any judgment, settlement, or recovery for any additional expense incurred by the provider in caring for the resident as a result of injury.

- (10) Provision A provision that requires the resident's 6 cooperation of the resident in assisting and assistance in the diligent prosecution of any claim or action against any
- (11) Provision A provision for the appointment of a 10 conservator or guardian by a court of competent with jurisdiction in the event a resident becomes unable to 12 handle his or her personal or financial affairs.
- (12) Provision that, in the event A provision to allow 14 a provider, whose property is tax exempt is required to 15 pay, to charge the resident on a pro rata basis property 16 taxes, or in-lieu taxes, the additional costs will be charged 17 to the resident on a pro rata basis provider is required to 18 *pay*.
- 19 (13) Other provisions—Any other provision approved 20 by the department.
- (d) (1) A copy of the resident's bill of rights as 22 described in Section—1771.5 1771.7 shall be attached to 23 every continuing care contract.

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- (e) A copy of the current audited financial statement 26 of the provider shall be attached to every continuing care 27 contract. For a provider whose current audited financial 28 statement does not accurately reflect the financial ability 29 of the provider to fulfill the continuing care contract 30 promises, this requirement obligations, the financial 31 statement attached to the continuing care contract shall 32 include supplemental statements or attachments that disclose all of the following:
 - (A) That
- 35 (1) A disclosure that the reserve requirement has not 36 yet been determined or met, and that entrance fees will not be held in escrow. 37
 - (B) That

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(2) A disclosure that the ability to provide the services promised in the continuing care contract will depend on successful compliance with the approved financial plan.

(C) The

(3) A copy of the approved financial plan for meeting the reserve requirements.

(e)

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- (4) Any other supplemental statements or attachments necessary to accurately represent the 10 provider's financial ability to fulfill its continuing care 11 contract obligations.
- (f) A schedule of the average monthly care fees for 13 each type of residential living unit charged to residents 14 for each type of residential living unit for each of the five preceding execution of the continuing 15 years 16 contract shall be attached to every continuing 17 contract. This The provider shall update this schedule 18 shall be updated annually at the end of each fiscal year. 19 If the continuing care retirement community has not 20 been in existence for five years, the information shall be provided for each of the years the continuing care 22 retirement community has been in existence.

23 (f)

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(g) If any continuing care contract provides for a 25 health insurance policy for the benefit of the resident, the 26 provider shall attach to the continuing care contract a 27 binder under complying with Sections 382 and 382.5 of 28 the Insurance Code—shall be attached to the continuing care contract.

(g) A

(h) The provider shall attach to every continuing care 32 contract a completed form in duplicate, captioned "Notice of Cancellation" shall be attached to every 34 continuing care contract. Such notice Cancellation." The 35 - form shall be easily detachable, and shall contain, in at 36 least 10-point boldface type, the following statement:

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1	"NOTICE OF CANCELLATION" (date)
2	
3	(Enter date of transaction)
4	Your first date of occupancy under this contract is:
5	
6	You
7	"You may cancel this transaction, without any penalty
8	within 90 calendar days from the above date.
9	If you cancel, any property transferred, any payments
10	made by you under the contract, and any negotiable
11	instrument executed by you will be returned within 14
12	calendar days after making possession of the living unit
13	available to the provider, and any. Any security interest
14	arising out of the transaction will be canceled.
15	If you cancel, you are obligated for to pay a reasonable
16	processing fee to cover costs and to pay for the reasonable
17	value of the services received by you from the provider
18	up to the date you canceled or made available to the
19	provider the possession of any living unit delivered to you
20	under this contract, whichever is later.
21	If you cancel, you must return possession of any living
22	unit delivered to you under this contract to the provider
23	in substantially the same condition as when received you
24	took possession.
25	Possession of the living unit must be made available to
26	the provider within 20 calendar days of your notice of
27	cancellation. If you fail to make the possession of any
28	living unit available to the provider, then you remain
29	liable for performance of all obligations under the
30	contract.
31	To cancel this transaction, mail or deliver a signed and
32	dated copy of this cancellation notice, or any other
33	written notice, or send a telegram
34 35	
35 36	(Name of provider)
37	at (Name of provider)
38	(Address of provider's place of business)
20	(reduces of provider a place of business)

not later than midnight of _____ (date).

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I hereby cancel this transaction (Transferor's signature) (Resident or transferor's signature)"

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- SEC. 51. Section 1788.2 of the Health and Safety Code is amended to read:
- 1788.2. (a) The—A continuing care contract may be 10 canceled without cause by written notice from either 11 party, within 90 days from the date of the transaction resident's initial occupancy.
- (b) For both equity and nonequity projects 14 continuing care contracts, death of the resident before or the cancellation period during shall constitute 16 cancellation of the continuing care contract under subdivision (a), unless a the continuing care contract 18 includes specific provisions otherwise.
- (c) The cancellation period and the associated refund 20 of obligations associated therewith shall apply as follows:
- (1) To all executed continuing care contracts executed 22 in conjunction with on equity continuing care retirement 23 communities regarding a unit in a continuing care 24 retirement community that is not an equity continuing 25 care retirement community.
- continuing (2) To care contracts executed 27 conjunction with a purchase of an equity interest from a 28 provider but not to continuing care contracts executed in 29 conjunction with sales of an equity interest by one 30 transferor resident to another.
- (d) The following fees may be charged before or 32 during the 90-day cancellation period:
- (1) If possession of the living unit in a nonequity 34 project continuing care retirement community that is 35 not an equity continuing care retirement community is 36 returned to the provider in substantially the same 37 condition as when received, the resident's only obligation 38 incurred by the resident obligations shall be to pay a 39 reasonable fee to cover costs and to pay the reasonable

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value of services rendered pursuant to the canceled continuing care contract.

- (2) Equity project providers may impose a transfer resale fee on sellers. For contracts entered into after January 1, 1996, those transfer fees are subject to the following limitations: 6
- (A) Upon upon the cancellation of a continuing care contract executed in conjunction with the purchase of an equity interest from the provider, the provider may 10 charge a transfer resale fee not to exceed the excess of the gross resale price of the equity interest over the purchase price paid by the transferor for the interest resident or on behalf of the resident for the interest.
- (B) Upon the cancellation of a continuing care 15 contract that is not executed in conjunction with the 16 purchase of an equity interest from the provider, the transfer fee shall be no greater than the sum of 10 percent of either the original or resale price of the equity interest and 100 percent of the excess, if any, of the gross resale price of the equity interest over the purchase price paid by the transfer for the interest.
- (e) Upon the termination of a continuing care 23 contract that occurs more than 90 days after the purchase 24 of the equity interest from the provider, the transfer No 25 resale fee shall be no greater than exceed the sum of 10 percent of either the original or resale price of the equity interest and 100 percent of the excess if any, of the gross resale price of the equity interest over the purchase price paid by the transferor resident or on behalf of the resident for the interest *if either of the following applies:*
- continuing care contract 32 purchase of an equity interest from the provider and is terminated after the cancellation period.
- 34 (2) *The* continuing care contract involved 35 purchase of an equity interest from another resident and 36 is terminated at any time.
- (f) For purposes of this section, "gross resale price" 37 means the resale price before any deductions for transfer 38 resale fees, transfer taxes, real estate commissions,

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periodic fees, late charges, interest, escrow fees, or any other fees incidental to the sale of real property.

- (g) This section-shall may not be construed to limit the 4 provider's ability to withhold delinquent periodic fees, 5 late charges, accrued interest, or assessments from the sale proceeds, as provided by the continuing care contract or the real estate documents governing the equity facility continuing care retirement community.
- SEC. 52. Section 1788.4 of the Health and Safety Code 10 is amended to read:
- 1788.4. (a) Except during During the cancellation 12 period—any, the provider shall pay all refunds due 13 pursuant to the continuing care contract shall be paid 14 owed to a resident within 14 calendar days after a resident 15 makes possession of the living unit available to the 16 provider.
- (b) After the cancellation period, any refunds due to 18 a resident under a continuing care contract shall be paid 19 within 14 calendar days after a resident makes possession 20 of the living unit available to the provider or within 90 21 calendar days after eancellation, death, or receipt of 22 notice of termination, whichever is later.

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(c) In nonequity projects, if the provider terminates 25 the continuing care contract is canceled by either party during the cancellation period or terminated by the provider after the cancellation period, the transferor shall resident shall be refunded the difference between the total amount of entrance, monthly, and optional fees paid and the amount used for care of the resident.

(c) When

(d) If a resident has paid additional fees have been 33 paid amounts for unit upgrades, these charges shall 34 amortize at the same rate as the entrance fee. The 35 transferor shall be refunded special features. 36 modifications to the living unit and the provider 37 terminates the resident's continuing care contract, the 38 provider shall amortize those additional amounts at the same rate as the entrance fee and shall refund the 40 unamortized balance to the resident.

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(e) A lump sum payment to a resident termination of a continuing care contract that conditioned upon resale of a unit shall not be considered to be a refund and may not be characterized or advertised as a refund. The lump sum payment shall be paid to the resident within 14 calendar days after resale of the unit.

SEC. 53. Section 1789 of the Health and Safety Code is amended to read:

- 1789. (a) Proposed changes of entity name, 10 structure, organization, operation, overall management of the continuing care retirement community, or 12 financing shall be submitted to the department for 13 review and approval A provider shall notify 14 department and obtain its approval before making any 15 changes to any of the following: its name; its business 16 structure or form of doing business; the overall management ofits continuing care retirement 18 community; or the terms of its financing.
- (b) The provider shall give written notice of proposed 20 changes to the department no less than at least 60 calendar days prior to in advance of making the changes described in this section.
- (c) This notice requirement does not apply to routine 24 facility staff changes.
- (d) Within 10 calendar days of submitting notification 26 to the department of any proposed changes under subdivision (a), the provider shall notify the resident association of the proposed changes in the manner required by subdivision (e) of Section 1779.
 - SEC. 54. Section 1789.2 of the Health and Safety Code is amended to read:
- 1789.2. (a) Any—A provider contemplating capital 33 financing that would entail a mortgage or deed of trust for 34 any property on which a resident resides pursuant to a 35 continuing care contract shall provide the department 36 with written notification notice at least 90 calendar days prior to the execution of the proposed closing any 38 transaction which includes all of the following: that results in an encumbrance or lien on a continuing care 40 retirement community property or its revenues.

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- (b) The written notice required by this section shall *include all of the following:*
- (1) A description of the terms and amount of the proposed transaction.
- (2) An analysis of the sources of funds for repayment of principal and interest.
- (3) An analysis of the impact of the proposed transaction on monthly care fees.
- (4) An analysis of the impact that the contemplated 10 proposed encumbrance of real property would have on 11 assets available for statutory reserves required by Section 1792.2, and refund reserves required by Section 1793.

(b) No provider

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- (c) Within seven calendar days of receipt of notice of 15 proposed changes, the department shall acknowledge 16 receipt of the notice in writing.
- (d) Within 30 calendar days following its receipt of the 18 notice, the department shall inform the provider in 19 writing whether additional materials are required to 20 evaluate the transaction.
- (e) Within 90 calendar days following its receipt of 22 additional materials, the department shall inform the 23 provider of its approval or denial of the proposed 24 transaction.
- (f) Providers shall not execute the proposed capital 26 financial transactions transaction for which notice has 27 been given pursuant to subdivision (a) without the 28 department's written authorization or until unless either 29 the 30-day response period or the 90 calendar day period 30 for departmental the department's review provider's request has expired without any response by the department.

(c)

- (g) If the department determines that the proposed 35 capital financial transaction will materially increase 36 monthly care fees or impair the provider's ability to maintain required reserves, the department may refuse:
 - (1) Refuse to approve the transaction, may record.
- (2) Record a notice of lien on the provider's property 40 pursuant to Section 1793.15, after notifying the provider

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and giving the provider an opportunity to withdraw the planned transaction, or take.

- (3) Take both actions and any other action that it 4 determines to be in is necessary to protect the best 5 interest of the residents.
- (h) Within 10 calendar days of submitting notification 7 to the department of any proposed encumbrance to the community property, the provider shall notify resident governing body or association of the proposed 10 encumbrance in the manner required by subdivision (e) of Section 1779.
- 12 SEC. 55. Section 1789.4 of the Health and Safety Code 13 is amended to read:
- 1789.4. (a) Any—A provider who proposes to sell or 15 transfer ownership of for a continuing care retirement 16 community to another party shall obtain approval from 17 the department before consummating the any sale or 18 transfer of the continuing care retirement community or any interest in that community, other than sale of an 20 equity interest in a unit to a resident or other transferor.
- (b) The provider shall submit provide 22 notification notice to the department at least 90 120 calendar days prior to execution of consummating the proposed transaction. The notification shall
- (c) The notice required by this section shall include all of the following: 26
 - (1) Identification—The identity of the proposed purchaser.
- (2) A description of the terms and amount of of the 30 transfer or sale, including the proposed transaction sales price.
- (3) A plan detailing how fulfillment of for ensuring performance of the existing continuing care contract 34 obligations will be ensured.

(e)

- (d) The provider shall give written notice to 36 continuing care contract residents and subscribers 60 37 depositors 120 calendar days prior to the sale or transfer. The notice shall include do all of the following: 39
 - (1) A description of Describe the parties.

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- (2) A description of Describe the proposed sale or 1 2 transfer.
 - (3) A description of Describe the arrangements for fulfilling continuing care contract obligations.
 - (4) A description of Describe options available to any subscriber depositor or resident who does not wish to have his or her contract assumed by a new provider.
 - (5) An-Include an acknowledgment of receipt of the notice to be signed by the resident.
 - (d) In the absence of the substitution of a new legal obligor for the
- (e) Unless a new provider assumes all of the continuing care obligations of the selling provider at the close of the sale or transfer, the selling provider shall set up a trust fund or secure a performance bond to ensure 16 the fulfillment of *all its* continuing care contract obligations.

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- (f) The new owner purchaser shall make applications 20 for, and obtain, the appropriate licenses and a certificate of authority and appropriate licenses, before executing any continuing care contracts, or providing care or supervision, or both, to any residents or assuming the selling provider's continuing care contract obligations.
 - SEC. 56. Section 1789.6 of the Health and Safety Code is amended to read:
- 1789.6. All providers—A provider shall record and 28 maintain with the county recorder a "Notice of Statutory 29 Limitation on Transfer" for each community as required 30 by paragraph (24) (1) of subdivision (a) (aa) of Section 1779.4 and Section 1786.
- SEC. 57. Section 1789.8 of the Health and Safety Code 32 33 is amended to read:
- 34 1789.8. Each provider shall obtain and maintain in 35 effect insurance or a fidelity bond for any each agent or 36 employee, who, in the course of his or her agency or 37 employment, has access to any substantial amount of 38 funds. This requirement is separate from the bonding requirements of Residential Care Facility residential care 40 facility for the Elderly elderly regulations.

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SEC. 58. Section 1793.5 of the Health and Safety Code is amended to read:

- 1793.5. (a) $\frac{Any}{An}$ entity that sells deposit subscriptions proposing accepts deposits and proposes to promise to provide care without having a current and valid permit to sell deposit subscriptions accept deposits is guilty of a misdemeanor.
- (b) Any—An entity which sells deposit subscriptions 9 that accepts deposits and fails to place any consideration 10 deposit received into an escrow account pursuant to as required by this chapter is guilty of a misdemeanor.
- (c) Any—An entity which that executes a continuing 13 care contract without holding a current and provisional certificate of authority or final certificate of authority is guilty of a misdemeanor.
- (d) Any An entity that abandons the a continuing care 17 retirement community or the entity's its obligations 18 under a continuing care contract, pursuant to subdivision 19 (f), is guilty of a misdemeanor. Any An entity in violation 20 of that violates this section shall be liable to the injured 21 resident for treble the amount of damages assessed in any 22 civil action brought by or on behalf of the resident in any 23 court having proper jurisdiction. The court may, in its 24 discretion, award all costs and attorney fees to the injured 25 resident, if that resident prevails in the action.
- (e) Each violation of subdivision (a), (b), (c), or (d) 27 is subject to a fine not to exceed ten thousand dollars 28 (\$10,000), or by imprisonment in the county jail for a 29 period not to exceed one year, or by both the fine and 30 imprisonment.
- (f) $\frac{Any}{An}$ entity that issues, delivers, or publishes, or 32 as manager or officer or in any other administrative capacity, assists in the issuance, delivery, or publication of any printed matter, oral representation, or advertising material which does not comply with the 36 requirements of this section chapter is guilty of a misdemeanor.
- 38 (g) Any A violation of subdivision (f) shall by an entity 39 will constitute cause for the suspension of all and any licenses, permits, provisional certificates of authority, and

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certificates of authority issued to-such that entity by any agency of the state.

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- (h) Any A violation under this section shall be is an act of unfair competition as defined in Section 17200 of the Business and Professions Code.
- SEC. 59. Section 1793.6 of the Health and Safety Code is amended to read:
- 1793.6. (a) The department may issue pursuant to this section containing orders of abatement 10 and assessing civil penalties against any entity who that violates Section 1771.2 or 1793.5.
- (b) If upon inspection or investigation, 13 department has probable cause to believe that an entity 14 is violating Section 1771.2 or 1793.5, the department may 15 issue a citation to that entity. Each citation shall be in 16 writing and shall describe with particularity the basis of the citation. Each citation shall contain an order of addition to the administrative 18 abatement. In imposed pursuant to Section 1793.27, a provider in 20 violation of an entity that violates the abatement order 21 shall be liable for an assessment of a civil penalty in the amount of two hundred dollars (\$200) per day for 23 violation of the abatement order.
- (c) The civil penalty authorized in subdivision (b) 25 shall be imposed if an uncertified facility a continuing retirement community is operated without provisional certificate of authority or certificate authority and the operator refuses to seek a certificate of authority or the operator seeks a certificate of authority 30 and the application is denied and the operator continues to operate the uncertificated facility continuing care retirement community without a provisional certificate of authority or certificate of authority, unless other available department, remedies to the including prosecution, are deemed more effective appropriate by 36 the department.
- (d) Service of a citation issued under this section may 38 be made by certified mail at the last known business address or residence address of the entity cited.

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- (e) Any entity served with Within 15 days after service of a citation under this section, an entity may appeal in writing to the department in writing within 15 working days after service of the citation with respect to 5 the violations alleged, the scope of the order of abatement, or *the* amount of civil penalty assessed. 6
- (f) If the entity cited fails without good cause to appeal 8 in writing to the department in writing within 15 business days after service of the citation, the citation shall become 10 a final order of the department. The department may 11 extend the 15-day period for good cause, to a maximum 12 of 15 additional days.
- (g) If the entity cited under this section makes a timely 14 appeal of the citation, the department shall provide an for hearing. The department 15 opportunity a 16 thereafter issue a decision, based on findings of fact, affirming, modifying, or vacating the citation or directing 18 other appropriate relief. The proceedings under this section shall be conducted in accordance with the 20 provisions of Chapter 5 (commencing with Section 21 11500) of Part 1 of Division 3 of Title 2 of the Government 22 Code, and the department shall have all the powers granted therein.
- the (h) After exhaustion of review procedures 25 specified in this section, the department may apply to the appropriate superior court for a judgment in the amount of the civil penalty and an order compelling the cited entity to comply with the order of abatement. The application, which shall include a certified copy of the 30 final order of the department shall be served upon the cited entity who shall have five business days within which to file that entity's response in writing in the superior court, this. This period may be extended for 34 good cause. Failure on the part of the cited entity to so 35 respond shall constitute grounds for entry of a default 36 judgment against that entity. In the event a response is timely filed in superior court, the action shall have 38 priority for trial over all other civil matters.
- (i) Notwithstanding any other provision of law, the 39 department may waive part or all of the civil penalty if

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the entity against whom the civil penalty is assessed satisfactorily completes all the requirements for, and is issued, a provisional certificate of authority or certificate of authority.

- 5 (j) Civil penalties recovered pursuant to this section 6 shall be deposited into the Continuing Care Provider Fee
 - SEC. 60. Section 1793.7 of the Health and Safety Code is amended to read:
- 1793.7. A permit to sell deposit subscriptions accept deposits, a provisional certificate of authority, or a 12 certificate of authority shall be for a continuing care 13 retirement community forfeited by operation of law 14 when any one of the following occurs:
- (a) The applicant has notified the department that 16 terminates marketing of for the proposed continuing care retirement community has been terminated.
- applicant or provider surrenders to the 19 department its residential care facility for the elderly 20 license, the permit to sell deposit subscriptions accept deposits, provisional certificate of authority, or certificate 22 of authority to the department for a continuing care 23 retirement community.
- provider sells or otherwise (c) The applicant or 25 transfers all or part of the continuing care retirement community.
- (d) The applicant or provider transfers stock where 28 the transfer results in a A change occurs in the majority change in ownership of the continuing care retirement community or the certificate of authority holder.
 - (e) The applicant or provider merges with another entity.
- (f) The applicant or entity makes a material change in 34 a pending application which requires a new application pursuant to subdivision (c) of Section 1779.8.
 - (g) The applicant or provider moves the continuing care retirement community from one location to another without the department's prior approval.

39 (f)

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applicant or provider (*h*) The abandons the continuing care retirement community or its obligations under the continuing care contracts.

(g)

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- (i) The applicant or provider is evicted from the continuing care retirement community premises.
- SEC. 61. Section 1793.8 of the Health and Safety Code is amended to read:
- 1793.8. A Certificate of Authority shall 10 automatically inactivated when a provider voluntarily ceases to enter into continuing care contracts with new 12 residents. The provider shall notify the department of its 13 intention to cease entering into continuing care contracts 14 and shall continue to comply with all provisions of this chapter until all continuing care contractual contract 16 obligations have been fulfilled.
- SEC. 62. Section 1793.9 of the Health and Safety Code 18 *is amended to read:*
- 1793.9. (a) Obligations pursuant to continuing care 20 contracts executed by a provider In the event of 21 liquidation, all claims made against a provider based on 22 the provider's continuing care contract obligations shall 23 be deemed a preferred claim claims against all assets 24 owned by the provider in the event of liquidation. 25 However, this these preferred elaim claims shall be 26 subject to any perfected claims secured by mortgage, 27 deed of trust, pledge, deposit as security, escrow, or otherwise secured the provider's assets.
- (b) In the event of liquidation by If the provider is 30 liquidated, residents who have executed a refundable continuing care contract shall be deemed to have a preferred claim to liquid assets held in the refund reserve 33 fund pursuant to Section 1793. This preferred claim shall 34 be superior to all other claims from residents without 35 refundable contracts, or any other creditor creditors. If 36 this fund and any other available assets are not sufficient to fulfill the refund obligations, each resident shall be 38 distributed a proportionate amount of the refund reserve funds shall be distributed to each resident in a proportionate amount, determined by dividing

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amount of each resident's refund due by the total refunds due and multiplying that percentage by the total funds available.

- (c) For purposes of computing the reserve required pursuant to Sections 1792.2 and 1793, the liens required under Section 1793.15 shall are not required to be deducted from the value of real or personal property.
- SEC. 63. Section 1793.11 of the Health and Safety Code is amended to read:
- 1793.11. (a) Any transfer of money or property, pursuant to a continuing care contract found by the department to be executed in violation of this chapter, is voidable at the option of the transferor for a period of 90 14 days from the execution of the transfer.
- (b) Any deed or other instrument of conveyance shall 16 contain a recital that the transaction is made pursuant to 17 rescission by the resident within 90 days from the date of 18 first occupancy.
- (c) No action may be brought for the reasonable value 20 of any services rendered between the date of transfer and the date the transferor resident disaffirms the continuing care contract.

(c)

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- (d) With respect to real property, the right 25 disaffirmance or rescission is conclusively presumed to 26 have terminated if a notice of intent to rescind is not recorded with the county recorder of the county in which the real property is located within 90 days from the date of execution of the conveyance by the transferor first 30 occupancy of the residential living unit.
- (d) Any deed or other instrument of conveyance shall 32 contain a recital that the transaction is made pursuant to rescission by the transferor within 90 days from the date 34 of the transfer.
- 35 (e) Any A transfer of a sum of money or property, real 36 or personal, to anyone pursuant to a continuing care contract that was not approved by the department is 38 voidable at the option of the department or transferor or his or her assigns or agents.

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(f) Any—A transaction determined by the department to be in violation of this chapter is voidable at the option of the transferor resident or his or her assigns assignees or 4 agents.

- SEC. 64. Section 1793.13 of the Health and Safety Code is amended to read:
- 1793.13. (a) In either of the following situations the The department may require the a provider to submit within 60 days a financial plan detailing the method by 10 which the provider proposes to overcome the deficiencies noted by the department. a financial plan, if either of the following applies:
- (1) If a A provider fails to file an a complete annual 14 report as required by Section 1790.
- (2) At any other time when the The department has 16 reason to believe that the provider is insolvent, is in imminent danger of becoming insolvent, is in a financially 18 unsound or unsafe condition, or that its condition is such that it may otherwise be unable to fully perform its obligations pursuant to continuing care contracts.
- (b) A provider shall submit its financial plan to the 22 department within 60 days following the date of the 23 department's request. The financial plan shall explain 24 how and when the provider will rectify the problems and 25 deficiencies identified by the department.
 - (c) The department shall approve or disapprove the plan within 30 days of its receipt.

(c)

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(d) If the plan is approved, the provider immediately implement the plan.

(e) If the plan is disapproved, or if it is determined that the plan is not being fully implemented, the department may, after consultation with and upon consideration of 35 the recommendations of the Continuing Care Contracts consult Committee, 36 Advisory with its financial consultants to develop a corrective action plan at the 38 provider's expense, or require the provider to obtain new or additional management capability approved by the department to solve its difficulties. A reasonable period,

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as determined by the department, shall be allowed to for the reorganized management to develop a plan which, subject to the approval of the department and after review by the committee, will reasonably assure that the provider will meet its responsibilities under the law.

SEC. 65. Section 1793.15 of the Health and Safety Code is amended to read:

secure 1793.15. (a) When necessary to applicant's or a provider's performance of all 10 obligations of the applicant or provider to transferors depositors or residents, the department may record a 12 notice or notices of lien on behalf of the transferors 13 depositors or residents. From the date of recording, the 14 lien shall attach to all real property owned or acquired by 15 the provider during the pendency of the lien, provided 16 such property is not exempt from the execution of a lien and is located within the county in which the lien is 18 recorded. The lien shall have the force, effect, and priority of a judgment lien.

- (b) The department may record a lien on any real 21 property owned by the provider if the provider's annual 22 report indicates the provider has an unfunded statutory 23 or refund requirement. A lien filed pursuant to this 24 section shall have the effect, force, and priority of a 25 judgment lien filed against the property.
- (c) The department shall file a release of the lien if the 27 department—deems determines that the lien is no longer necessary secure the applicant's or provider's to performance of all its obligations of the applicant or provider to the transferors depositors or residents.

(c) The

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(d) Within 10 days following the department's denial of a request for a release of the lien, the applicant or provider may file an appeal to with the department-from a refusal of a request for a release of the lien.

(d)

(e) The department's final decision shall be subject to 38 court review pursuant to Section 1094.5 of the Code of Civil Procedure, upon petition of the applicant or provider filed within 30 days of service of the decision.

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SEC. 66. Section 1793.17 of the Health and Safety Code is amended to read:

- 1793.17. (a) When necessary to secure the interests of transferors depositors or residents, the department may require that the applicant or provider reestablish an escrow account, return previously released moneys to escrow, and escrow all future entrance fee payments.
- (b) The department may release funds from escrow as deems appropriate or terminate it requirement when it deems determines that the escrow 10 is no longer necessary to secure the performance of all obligations of the applicant or provider to the transferors depositors or residents.
- SEC. 67. Section 1793.19 of the Health and Safety 15 *Code is amended to read:*
 - and 1793.19. The civil, criminal, administrative remedies available to the department pursuant to this article are not exclusive and may be sought and employed department, any combination thein advisable by the department to enforce this chapter.
 - SEC. 68. Section 1793.21 of the Health and Safety Code is amended to read:
- 1793.21. The department, in its discretion, 24 condition, suspend, or revoke any permit to sell deposit subscriptions accept deposits, provisional certificate of authority, or certificate of authority issued under this chapter if it finds that any one or more of the following apply to the applicant or provider:
- (a) Violation by the provider of The applicant or 30 provider violated this chapter or the rules and regulations adopted under this chapter.
 - (b) Aiding, abetting—The applicant or provider aided, abetted, or permitting permitted the violation of this chapter or the rules and regulations adopted under this chapter.
- (c) Suspension or revocation of the license of the 37 provider The provider's or applicant's license suspended or revoked pursuant to the licensing provisions of Chapter 2 (commencing with Section 1250) or Chapter 3.2 (commencing with Section 1569).

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(d) Material—The provider or applicant made a material misstatement, misrepresentation, fraud obtaining the permit to sell deposit subscriptions accept deposits, provisional certificate of authority, or certificate of authority.

- (e) Demonstrated The provider or applicant demonstrated a lack of fitness or trustworthiness.
- (f) Fraudulent The provider or applicant engaged in any fraudulent or dishonest practices of management in the conduct of business.
- (g) Misappropriation, conversion—The provider applicant misappropriated, converted, or withholding of withheld moneys.
- (h) Refusal by the provider After request by the 15 department for an examination, access to records, or 16 information, the provider or applicant refused to be examined or to produce its accounts, records, and files for 18 examination, or refusal by any of its officers refused to give information with respect to its affairs, or refused to 20 perform any other legal obligations as to such related to an examination, when required by the department.
- (i) The provider's The provider's applicant's 23 unsound financial condition or use of.
 - (j) The provider or applicant used such methods and practices in the conduct of business as to render further transactions by the provider or applicant hazardous or injurious to the public.

(j) Failure

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(k) The provider or applicant failed to maintain at all times at least the minimum statutory reserves required by Section 1792.2.

(k) Failure

(l) The provider or applicant failed to maintain the 34 reserve fund escrow account for prepaid continuing care contracts required by Section 1792.

(1) Failure

- (m) The provider or applicant failed to comply with 37 the refund reserve requirements of stated in Section 38 39 1793.
 - (m) Failure by the provider

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- (n) The provider or applicant failed to maintain requirements of this comply with the chapter for maintaining escrow accounts for funds as required by this 4 chapter.
 - (n) Failure

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- (o) The provider or applicant failed to file an the annual report as required by described in Section 1790.
 - (o) Violation of
- (p) The provider or applicant violated a condition on 10 a its permit to accept deposits, provisional certificate of authority, or certificate of authority.
 - (p) Failure
- (q) The provider or applicant failed to comply with its 14 approved financial and marketing plan, or to secure approval of a modified plan. 15
 - (q) A material change
- (r) The provider or applicant materially changed or 18 deviation deviated from the an approved plan operation without the prior consent of the department.
 - (r) Failure by the provider
 - (s) The provider or applicant failed to fulfill-its his or her obligations under continuing care contracts.
 - (s) Material
- provider material (t) The or applicant made 25 misrepresentations to *depositors*, prospective residents, or residents of, a continuing care retirement community.
 - (t) Failure by the provider
- (u) The provider applicant failed to or 29 proposed changes to continuing care contracts prior to 30 use, or execution of using a continuing care contract that has not been previously approved by the department.
 - (u) Failure by the provider
- 33 (v) The provider or applicant failed to diligently 34 submit materials requested by the department required by the statute. 35
- SEC. 69. Section 1793.23 of the Health and Safety 36 37 *Code is amended to read:*
- 1793.23. (a) The department shall consult with and 38 39 consider the recommendations of the Continuing Care
- 40 Contracts Advisory Committee prior to conditioning,

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suspending, or revoking any permit to sell deposit subscriptions accept deposits, provisional certificate of authority, or certificate of authority.

- (b) The provider shall have a right of appeal to the 5 department. The proceedings shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the department shall have all of the powers granted therein. A suspension, condition, or revocation 10 shall remain in effect until completion of the proceedings in favor of the provider. In all proceedings conducted in accordance with this section, the standard of proof to be applied shall be by a preponderance of the evidence.
- (c) The department may, upon finding of changed 15 circumstances, remove a suspension or condition.

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- SEC. 70. Section 1793.25 of the Health and Safety Code is amended to read:
- 1793.25. (a) During the period that the revocation or 19 suspension action is pending against the permit to sell 20 deposit subscriptions accept deposits, provisional certificate of authority, or certificate of authority, the provider shall not enter into any new deposit agreements 23 or continuing care contracts or deposit subscription agreements.
 - (b) The suspension or revocation by the department, or voluntary return of the provisional certificate of authority or certificate of authority by the provider, shall not release the provider from obligations assumed at the time the continuing care contracts were executed.
 - SEC. 71. Section 1793.27 of the Health and Safety Code is amended to read:
- 1793.27. (a) If the department finds that any entity 33 has violated Section 1793.5 or one or more grounds exist 34 for the discretionary condition, revocation conditioning, 35 revoking, or suspension of suspending a permit to—sell 36 deposit subscriptions accept deposits, provisional certificate of authority, or a certificate of authority issued under this chapter, the department, in lieu of the condition, revocation, or suspension, may impose a an administrative fine upon the an applicant or provider in

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an amount not to exceed one thousand dollars (\$1,000) per violation.

(b) The administrative fine shall be deposited in the Continuing Care Provider Fee Fund and shall be 5 disbursed for the specific purposes of offsetting the costs 6 investigation and litigation and to compensate administrators when court-appointed continuing retirement community assets are insufficient.

SEC. 72. Section 1793.29 of the Health and Safety 10 *Code is amended to read:*

1793.29. In the case of any violation or threatened 12 violation of this chapter, the department may institute a proceeding or may request the Attorney General to 14 institute a proceeding to obtain injunctive or other 15 equitable relief in the superior court in and for the county 16 in which the violation—occurs has occurred or will occur, 17 or in which the principal place of business of the provider 18 is located. The proceeding under this section shall the 19 conform requirements with of Chapter 20 (commencing with Section 525) of Title 7 of Part 2 of the 21 Code of Civil Procedure, except that no undertaking shall 22 be required of the department in any action commenced 23 under this section, nor shall the department be required 24 to allege facts necessary to show lack of adequate remedy at law, or to show irreparable loss or damage. 25

SEC. 73. Section 1793.50 of the Health and Safety 27 *Code is amended to read:*

1793.50. (a) The department, after consultation with Continuing Care Contracts Advisory Committee, may petition the superior court for an order appointing 31 a qualified administrator to operate a continuing care 32 retirement community, and thereby mitigate imminent crisis situations wherein where elderly residents are left 34 without means for their could lose support services or be 35 moved without proper preparation, in any of the 36 following circumstances:

- (1) The provider is insolvent or in imminent danger of 38 becoming insolvent.
- (2) The provider is in a financially unsound or unsafe 39 40 condition.

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(3) The provider has failed to establish has or substantially depleted the reserves required by this chapter.

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- (4) A—The provider has failed to submit a plan, as specified in Section 1793.13, has not been approved by the department or has not approved the plan submitted by the provider, the provider has failed to implement the plan approved by the department has implemented the plan, or the plan has not been 10 successful.
 - (5) The provider is unable to fully perform its obligations pursuant to continuing care contracts.
- (6) The residents are otherwise placed in serious 14 jeopardy.
- (b) The administrator may only assume the operation 16 of the continuing care retirement community in order to either accomplish one or more of the following: 18 rehabilitate the provider to enable it fully to perform its continuing care contract obligations; implement a plan of reorganization acceptable to the department,; facilitate the transition if where provider another assumes continuing care contract obligations,; facilitate an orderly liquidation of the provider.
 - (c) With each petition, the department shall include a request for a temporary restraining order to prevent the provider from disposing of or transferring assets pending the hearing on the petition.
- (d) The provider shall be served with a copy of the petition, together with an order to appear and show cause 30 why management and possession of the continuing care retirement community or assets should not be vested in an administrator.
- (e) The order to show cause shall specify a hearing 34 date, which shall be not less than five nor more than 10 days following service of the petition and order to show 36 cause on the provider.
- (f) Petitions to appoint an administrator shall have 37 precedence over all matters, except criminal matters, in the court.

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(g) At the time of the hearing, the department shall advise the provider and the court of the name of the proposed administrator.

- (h) If, at the conclusion of the hearing, including such 5 oral evidence as the court—shall may consider, the court 6 finds that any of the circumstances specified in subdivision (a) exist, the court shall issue an order appointing an administrator to take possession of the property of the provider and to conduct the business 10 thereof, enjoining the provider from interfering with the administrator in the conduct of the rehabilitation, and 12 directing the administrator to take steps toward removal 13 of the causes and conditions which have 14 rehabilitation necessary, as the court may direct.
- (i) The order shall include a provision directing the 16 issuance of a notice of the rehabilitation proceedings to 17 the residents the continuing care retirement 18 community and to other interested persons as the court shall direct.
- (j) The court may permit the provider to participate 21 in the continued operation of the continuing retirement community during the pendency of any appointments ordered pursuant to this section and shall specify in the order the nature and scope of the 25 participation.
- (k) The court shall retain jurisdiction throughout the 27 rehabilitation proceeding and may issue further orders as 28 it deems necessary to accomplish the rehabilitation or orderly liquidation of the continuing care retirement community in order to protect the residents of the continuing care retirement community.
- SEC. 74. Section 1793.56 of the Health and Safety 32 33 Code is amended to read:
- 34 1793.56. (a) Reasonable compensation shall be paid 35 to the The appointed administrator appointed is entitled 36 to reasonable compensation.
- (b) Costs for the compensation shall—The 38 compensating the administrator may be levied charged against the assets of the provider. When facility the 40 provider's assets and assets from the continuing care

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1 retirement community are insufficient, the department, in its discretion, may compensate the administrator from funds available from the Continuing Care Provider Fee Fund.

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- (c) Any individual appointed administrator, to Section 1793.50, shall be held harmless for any negligence in the performance of his or her duties and the provider shall be indemnified by indemnify the provider administrator for all costs of defending actions brought against him or her in his or her capacity as administrator.
- SEC. 75. Section 1793.58 of the Health and Safety 12 *Code is amended to read:*
- 1793.58. (a) The department, administrator, or any 14 interested person, upon due notice to the administrator, at any time, may apply to the court for an order 16 terminating the rehabilitation proceedings permitting the provider to resume possession of the 18 provider's property and the conduct of the provider's business.
- (b) No order shall be granted The court shall not issue 21 the order requested pursuant to subdivision (a) except 22 when unless, after a full hearing, the court has 23 determined that the purposes of the proceeding have 24 been fully and successfully accomplished and that the 25 continuing care retirement community can be returned 26 to the provider's management without further jeopardy 27 to the residents of the continuing care retirement community, creditors, owners of the continuing care retirement community, and to the public.
- (c) An—Before issuing any order terminating 31 rehabilitation proceeding the court shall be based upon 32 consider a full report and accounting by the administrator of regarding the provider's affairs, including the conduct 34 of the provider's officers, employees, and business during the rehabilitation and of the provider's current financial 36 condition.
 - of order (d) Upon issuance an terminating the rehabilitation, the department shall reinstate the provisional certificate of authority or final certificate of authority—and. The department may condition, suspend,

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or revoke the reinstated certificate only upon a change in the conditions existing at the time of the order or a determination upon the discovery of facts which, if such 4 facts had been known at the time of the order, the court 5 would not have entered the order as determined by the department determines would department the 6 resulted in a denial of the request for an order terminating the rehabilitation had the court been aware 9 of these facts.

SEC. 76. Section 1793.60 of the Health and Safety 10 11 Code is amended to read:

1793.60. (a) If time any the department at further efforts to determines that rehabilitate 14 provider would not be in the best interest of the residents 15 or prospective residents, or would not be economically 16 feasible, the director department may, with the approval 17 of the Continuing Care Contracts Advisory Committee, 18 apply to the court for an order of liquidation and dissolution or may apply for other appropriate relief for 20 dissolving the property and bringing to conclusion its business affairs.

- (b) Upon issuance of an order directing the liquidation 23 or dissolution of the provider, the department shall revoke the provider's provisional certificate of authority or final certificate of authority.
- SEC. 77. Section 1793.62 of the Health and Safety 26 27 Code is amended to read:
- 1793.62. (a) The department, administrator, or 29 interested person, upon due notice to the parties, may 30 petition the court for order terminating an 31 rehabilitation proceedings when the rehabilitation 32 efforts have not been successful, the continuing care retirement community has been sold at foreclosure sale, 34 the provider has been declared bankrupt, or the provider 35 has otherwise been shown to be unable to perform its 36 obligations under the continuing care contracts.
- (b) No order shall be granted The court shall not issue 37 38 the order requested pursuant to subdivision (a) unless all of the following have occurred:

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(1) There has been a full hearing and the court has determined that the provider is unable to perform its contractual obligations.

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- (2) The administrator has given the court a full and 5 complete report and financial accounting signed by the administrator as being a full and complete report and accounting.
- (3) The court has determined that the residents of the care retirement community 10 protected to the extent possible and has made such orders in this regard as the court deems proper.
- SEC. 78. No reimbursement is required by this act 12 13 pursuant to Section 6 of Article XIII B of the California 14 Constitution because the only costs that may be incurred 15 by a local agency or school district will be incurred 16 because this act creates a new crime or infraction, 17 eliminates a crime or infraction, or changes the penalty 18 for a crime or infraction, within the meaning of Section 19 17556 of the Government Code, or changes the definition 20 of a crime within the meaning of Section 6 of Article 21 XIII B of the California Constitution.